Request for Application #18-10134

African American/Black Regional Initiative to Reduce Tobacco–Related Disparities

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH
CALIFORNIA TOBACCO CONTROL PROGRAM

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Part I. Funding Opportunity Overview

A. Background and Authorizing Legislation

In November 1988, California voters approved passage of the *Tobacco Tax and Health Protection Act of 1988*, also known as Proposition 99 (Prop 99). This initiative increased the state cigarette tax by 25-cents per pack and added an equivalent amount on other tobacco products. The revenue from Prop 99 was designated for tobacco-related research, health education and promotion, and health care services, and as a result, the California Tobacco Control Program (CTCP) was established in 1989.

In November 2016, California voters overwhelmingly approved the *California Healthcare, Research, and Prevention Tobacco Act of 2016,* Proposition 56 (Prop 56), by a 64 percent to 36 percent vote. Prop 56 added an additional $2.00 tax to each pack of cigarettes and an equivalent tax on other tobacco products, including electronic smoking devices (ESDs) and designated that a portion of the tobacco tax revenue be directed toward preventing and reducing tobacco use. Of the funds directed to the California Department of Public Health (CDPH) for a comprehensive tobacco control program, Prop 56 requires that a minimum of 15 percent of funds be used to accelerate and monitor the rate of decline in tobacco-related disparities with a goal of eliminating tobacco-related disparities.

The enabling legislation for California's comprehensive tobacco control program is provided by the following: Assembly Bill (AB) 75 (Chapter 1331, Statutes of 1989), AB 99 (Chapter 278, Statutes of 1991), AB 816 (Chapter 195, Statutes of 1994), AB 3487 (Chapter 199, Statutes of 1996), Senate Bill (SB) 99 (Chapter 1170, Statutes of 1991), SB 960 (Chapter 1328, Statutes of 1989), SB 493 (Chapter 194, Statutes of 1995); the annual State Budget; Health and Safety (H&S) Code Sections 104350-104445, 104500-104545; and Revenue and Taxation Code Sections 30121-30130.

H&S Code Sections 104350-104445 authorize CDPH/CTCP to fund grants that prevent and reduce tobacco use and that do the following:

- Demonstrate community support for the grant.
- Coordinate with other local health programs, school-based programs, or voluntary health organizations.
- Use and enhance existing services.
- Serve a priority population at high risk of starting tobacco use or developing tobacco-related illnesses.
- Demonstrate an understanding of the role community norms have in influencing behavior change regarding tobacco use.
- Indicate innovative or promising approaches that can be replicated by others.

B. Funding Purpose

The purpose of this Request for Application (RFA) is to fill a coverage gap in addressing tobacco-related disparities affecting the African American/Black population as a result of funding only two (2) regional projects to work with this population through *RFA 17-10569 Regional Initiative to Mobilize Communities and Reduce Tobacco-Related Disparities Among African American/Black, Asian/Pacific Islander, Hispanic/Latino and Lesbian, Gay, Bisexual, Transgender, Queer (LGBTQ) Populations* released in September 2017. This RFA will fund up to four (4) projects to reduce tobacco-related health disparities and achieve health equity among the African American/Black populations through regional approaches directed towards policy and systems change focused on tobacco use prevention and reduction. (See Table 1. *Eligible African American/Black Populations Regions* for a list of the geographical regions and counties that are the focus for this RFA). Applicants may submit more than one (1) application to work in different regions.

Projects funded under this RFA are expected to work closely with the African American/Black Statewide Coordinating Center funded under (RFA 17-10593). The Statewide Coordinating Center is to work with the African American/Black regional projects and others working with this population in order to accelerate the adoption, implementation, and impact policy and system change campaigns directed by regional and local projects.

Regional approaches are to incorporate the following features:

- Create new and strengthen existing networks of agencies and organizations to work on a shared agenda of tobacco use prevention and reduction.
- Mobilize community residents to advocate on their behalf for tobacco use prevention and reduction policy and systems changes.
- Implement, support, and evaluate policy and systems change campaigns focused on tobacco use prevention and reduction within the African American/Black populations.

Applicants are encouraged to link tobacco use prevention and reduction efforts to other community concerns and social determinants of health, which are associated with premature death and disease among the African American/Black populations. Social determinants of health are those social conditions that shape the overall health of populations. Factors such as the availability of education, food, employment opportunity, and political, social, and economic forces have an impact on the health of populations, communities, neighborhoods, and individuals. This may include, but is not limited to, collaborating with organizations and groups addressing nutrition, alcohol prevention, substance abuse prevention, healthy housing, affordable housing efforts, school dropout programs, living wage initiatives, the built environment, and crime prevention. However, Applicants should remain cognizant that the use of Prop 56 funds and proposed objectives and activities in response to this RFA must be consistent with the authority provided by H&S Code Sections

104350-104445 and the RFA. See Appendix 1: *Examples of Using Grant Funds to Address Social Determinants of Health (SDOH)* for examples of ways in which grant funds may be used to address social determinants of health.

C. Funding Restrictions

This RFA will not fund the following:

- Activities that supplant or duplicate existing programs or services funded by CDPH/CTCP or another source;
- Objectives that solely focus on increased knowledge or awareness as outcomes;
- Purchase or improvement of land, or building alterations, renovations or construction;
- Fundraising activities;
- Lobbying;
- Reimbursement in support of planning activities or preparation and submission of a grant application in response to the RFA;
- Reimbursement of costs incurred prior to the effective date of the Agreement;
- Reimbursement of costs currently covered by another CDPH contract or agreement;
- Reimbursement of costs that are not consistent or allowable according to local and state guidelines or regulations;
- Supplanting existing state or local funds used for tobacco use prevention and reduction efforts;
- Provision of direct medical care, including provision of cessation pharmacotherapy;
- Reimbursement of professional licensure;
- Reimbursement of malpractice insurance;
- Reimbursement to health care providers for the delivery of health care services;
- Support of religious activities, including, but not limited to, religious instruction, worship, prayer, or proselytizing; and
- Growing or cultivating traditional tobacco.

D. Public Health Significance of Tobacco Use

Tobacco Use and Disease

Tobacco use remains the number one cause of preventable death, disease, and disability in the United States (U.S.).[1] Forty percent of all cancer diagnoses in the nation are attributed to tobacco use[2,3] while smoking accounts for 85 percent of lung cancers,[4] 80 percent of chronic obstructive pulmonary disease, 30 percent of cardiovascular disease, and 30 percent of cancer deaths.[1] Each year, tobacco-related diseases account for approximately 15.4 percent or 40,000 of deaths in California.[5,6]

Direct health care costs attributed to tobacco use in California are $13.29 billion annually and of this, California taxpayers spend $3.58 billion dollars each year to

treat cancer and other smoking-related diseases through Medi-Cal.[5] To put this in perspective, the fiscal year (FY) 2017/2018 budget for the CDPH was $3.2 billion.[7]

California's smoking population totals approximately 3.2 million people, with the number of smokers in the state exceeding the total population in 21 states.[8,9] Eliminating tobacco use would profoundly improve the health of Californians and considerably reduce health care costs.

Tobacco Use and Priority Populations

Since 1989, as a result of concentrated efforts to reduce initiation and use of tobacco and to protect non-smokers from secondhand smoke (SHS), CDPH and its partners have reduced the smoking prevalence among adult Californians from 23.7 percent in 1988 to 10.5 percent in 2015, representing a 55.7 percent decline in smoking. Despite this success, large differences in smoking prevalence persist for adults and youth by race/ethnicity and among population groups by socioeconomic status, educational attainment, occupation, mental health status, sexual orientation, and geography. These high-risk groups suffer disproportionately from tobacco-related illnesses and death despite the progress made in reducing adult tobacco use in California.[10]

Tobacco Use in African American/Black Communities

The tobacco use rate for African American Californians is 19.5 percent, as compared to the 13.5 percent rate of use among non-Hispanic, Caucasian Californians.[11] According to the California Cancer Registry, people who are African American experience the highest lung cancer incidence and mortality rates of all other racial and ethnic groups in California.[12] African American children are the most likely to live with someone who smokes and are at highest risk for secondhand smoke exposure at home, followed by children who are Caucasian, Hispanic/Latino, and Asian/Pacific Islander. Further, African American children are more than three times as likely as any other racial/ethnic group to live in a home where smoking is permitted.[13]

Tobacco's Impact on Non-Users and the Environment

Tobacco's toll extends beyond the direct user: 1) SHS is a known health risk for non-smokers; 2) there is growing evidence of the toxicity of thirdhand smoke; and 3) research indicates that the production of tobacco products and discarded tobacco waste harm the environment. The *2006 Surgeon General's Report on the Health Consequences of Involuntary Exposure to Secondhand Smoke* concluded that there is no risk-free level of exposure to SHS.[14] Exposure to SHS has been linked to adverse health effects that harm fetuses, infants, children, and adults.[1] According to the *2006 Surgeon General's Report*, SHS is proven to cause lung cancer, heart disease, serious respiratory illnesses such as bronchitis and asthma, low birth weight, and sudden infant death syndrome.[14] In 2014, more than half of adult Californians reported recently being exposed to SHS, and of those, 12 percent noting their most recent exposure was at home or at work.[10] As with smoking, stark differences in exposure to SHS by demographics exist.[10]

A growing body of research suggests that thirdhand smoke, the tobacco smoke residue that remains in indoor environments after active smoking ceases, is a public health hazard distinct from SHS. Toxic chemicals from SHS become embedded in wallboard, carpeting, drapes, furniture, pets, and clothing. These materials serve as a reservoir of toxic chemicals that change over time from environmental conditions, making new and additional pollutants that are re-emitted from surfaces and inhaled or directly absorbed into the body through skin and ingestion routes.[15]

The public health impact of tobacco products extends beyond its direct impact on humans, through its negative impact on the environment. The World Health Organization's 2017 report, *Tobacco and its Environmental Impact: An Overview*, notes that healthy soil, an adequate supply of clean and fresh water, and clean air are among the basic necessities that enable humans to live, but these are adversely impacted by the tobacco industry through the cultivation, manufacturing, transport, use of the product, and as a result of discarded tobacco product waste.[16] The global impact of tobacco use includes agrochemical use, deforestation, carbon dioxide, methane emissions, secondhand and thirdhand smoke, and pollution of the soil and waterways, harming the planet's biodiversity.[16]

Ending the Tobacco Use Epidemic

In recent years, there has been an increased understanding and acknowledgement that the tobacco epidemic is produced by the tobacco industry and their products. This recognition is facilitating a public health paradigm shift moving the focus from "tobacco control" strategies to "endgame" strategies.[17] Endgame strategies are those initiatives designed to change or permanently eliminate the structural, political, and social dynamics that sustain the tobacco epidemic, in order to end it within a specific time.[18]

In October 2016, the *New England Journal of Medicine* published an article by Dr. Michael Fiore that analyzed the rates of decline in adult smoking during the presidential administrations of Bill Clinton, George W. Bush, and Barack Obama.[19] Dr. Fiore noted that the fastest rate of decline in adult smoking was under the Obama presidency and attributed this to several policy changes, regulatory actions, and public health initiatives. These efforts included a $0.62 federal cigarette tax increase; the enactment of the 2009 Family Smoking Prevention and Tobacco Control Act; the launch of the Centers for Disease Control and Prevention's (CDC) *Tips* cessation mass media campaign; the Affordable Care Act (ACA) which required insurers to cover treatment of nicotine addiction with evidence-based interventions; and other measures which helped accelerate smoking cessation.[19]

Dr. Fiore projected that if the adult smoking rate continues to decline at the pace set during the Obama presidency, then smoking rates in the U.S. will reach zero by 2035,[i] noting that this is not an aspirational, but an achievable goal.[19] To this end, Dr. Fiore laid out public health policy and education initiatives that will accelerate

[i] In the United States, cigarettes account for most of the combustible tobacco products sold. Sales of non-cigarette tobacco products have not decreased at the same rates.

progress to eliminate tobacco use. These include tobacco excise tax increases, SHS protections, mass media campaigns, interventions targeted towards priority populations, full implementation of the ACA's tobacco use cessation benefits, and raising the legal age of tobacco sales to 21.[19] With the infusion of Prop 56 funding for tobacco use prevention and cessation, California is well positioned to end the tobacco epidemic by 2035, if not sooner.

E. California Tobacco Control Program Goals

In consideration of: 1) the resources provided by Prop 56; 2) the paradigm shift from "tobacco control" to "endgame" strategies; and 3) a projection that it is possible to eliminate smoking by 2035 nationally, the goal of California's tobacco use prevention and reduction efforts is to end the tobacco epidemic for all population groups. CDPH/CTCP is guided by the principle of health equity, which is defined as "efforts to ensure that all people have full and equal access to opportunities that enable them to lead healthy lives" (H&S Code Section 131019.5). To achieve health equity, additional focus must be placed on engaging with priority population communities to address tobacco-related disparities. The framework for achieving this overarching goal of ending the tobacco epidemic continues to focus on changing the social norms surrounding tobacco use by "indirectly influencing current and potential future tobacco users by creating a social milieu and legal climate in which tobacco becomes less desirable, less acceptable, and less accessible."[20] Sub-goals, referred to as priority areas, supporting the social norm change strategy are to:

1. **Limit Tobacco Promoting Influences**. Efforts supporting this goal seek to curb advertising and marketing tactics used to promote tobacco products and their use, counter the glamorization of tobacco use through entertainment and social media venues, expose tobacco industry practices, and hold tobacco companies accountable for the impact of their products on people and the environment.

2. **Reduce Exposure to Secondhand Smoke, Tobacco Smoke Residue, Tobacco Waste, and Other Tobacco Products**. Efforts supporting this goal address the impact of tobacco use on people, other living organisms, and the physical environment resulting from exposure to: secondhand smoke, tobacco smoke residue, tobacco waste, and other non-combustible tobacco products.

3. **Reduce the Availability of Tobacco**. Efforts supporting this goal address the sale, distribution, sampling, or furnishing of tobacco products and other nicotine containing products that are not specifically approved by the Food and Drug Administration (FDA) as a treatment for nicotine or tobacco dependence.

4. **Promote Tobacco Cessation**. Efforts supporting this goal improve awareness, availability and access to cessation assistance via the California Smokers' Helpline, the health and behavioral care systems, and community.

Part II. Initiative to Prevent & Reduce Tobacco-Related Disparities

A. Initiative Overview

Prop 56 requires that a minimum of 15 percent of funds be used to accelerate and monitor the rate of decline in tobacco-related disparities with a goal of eliminating tobacco-related disparities. To meet this mandate, CDPH/CTCP is leveraging and expanding its existing infrastructure (see Appendix 2. *Leveraging Existing California Tobacco Control Program Infrastructure*) and launching the *Initiative to Reduce Tobacco-Related Disparities* comprised of seven (7) targeted smaller initiatives (see Appendix 3. *Initiative to Reduce Tobacco-Related Disparities*), including the African American/Black Regional Initiative to Reduce Tobacco-Related Disparities. Efforts to leverage the current infrastructure include expanding:

- Statewide media reach to include multiple multi-cultural English language and non-English language campaigns;
- Capacity of the California Smokers' Helpline to serve more tobacco users;
- Surveillance systems to collect more robust data on priority population groups; and
- Training and technical assistance services to build the capacity of agencies, including during the grant application process, and to develop more educational materials and resources reflective of California's diverse populations.

The *Regional Initiative to Reduce Tobacco-Related Disparities* is focusing on a subset of the priority populations groups identified in the 2018-2020 Tobacco Education and Research Oversight Committee's (TEROC) Master Plan, New Challenges, New Promises for All. The TEROC priority population groups are listed below.

- African Americans, American Indian and Alaska Natives, Native Hawaiians and Pacific Islanders, Asian American men, and Latinos;
- People of low socioeconomic status (SES),
- People with limited education, including high school non-completers;
- Sexual and gender minorities, including lesbian, gay, bisexual, and transgender (LGBT) people;
- Rural residents;
- Current members of the military and veterans;
- Individuals employed in jobs or occupations not covered by smoke-free workplace laws;
- People with substance use disorders or behavioral health issues;
- People with disabilities; and
- School-age youth.

The *2018-2020 TEROC Master Plan* identifies more than a dozen priority populations groups and of these, there is considerable overlap among the groups. In

order to create critical mass, CDPH/CTCP identified a subset of TEROC's priority population groups to be the focus of intense interventions in its *Initiative to Reduce Tobacco-Related Disparities* are populations that:

- Have high rates of tobacco use and/or secondhand smoke exposure, or
- Comprise a large number of California's 3.2 million smokers, or
- Capture multiple categories of risk for tobacco use (e.g., race/ethnicity, lack of educational attainment, military service, disabilities), or
- Reflect groups that are included in existing surveillance systems, so change in tobacco use and tobacco-related disparities among these groups can be tracked to monitor the effectiveness of interventions to prevent and reduce tobacco use in these groups.

B. Introduction: African American/Black Regional Initiative to Reduce Tobacco-Related Disparities

In recognition of geographic variation in demographic diversity across California, the *African American/Black Regional Initiative to Reduce Tobacco-Related Disparities* seeks to fund targeted population-specific tobacco use prevention and reduction campaigns in specific geographical regions of the state. In September 2017, eighteen (18) projects were awarded funding to reduce tobacco-related health disparities and achieve health equity under *RFA 17-10569 Regional Initiative to Mobilize Communities and Reduce Tobacco-Related Disparities Among African American/Black, Asian/Pacific Islander, Hispanic/Latino and Lesbian, Gay, Bisexual, Transgender, Queer (LGBTQ) Populations*. Under the September 2017 RFA, two (2) out of six (6) possible projects were awarded funding to reduce tobacco related disparities among the African American/Black populations. These projects were funded in the Gold Country and South Coast Regions and began operations on May 1, 2018. This RFA seeks to fill the project coverage gap as it relates to working with African American/Black populations to reduce tobacco-related disparities.

CDPH/CTCP also funded four (4) priority population specific statewide Coordinating Centers to foster collaboration and community engagement among the regional projects under *RFA 17-10593 Statewide Coordinating Centers for Priority Populations.* These projects began May 1, 2018 and were funded to accelerate the adoption, implementation, and impact of policy and system change campaigns conducted by the regional projects. See Appendix 4: *Priority Population Regional Project Site Selection and Funding Methodology* for more information about the assignment of priority population groups by region.

1. About the Regions

- The geographical regions are historic groupings of counties established in 1992. The regions were originally based on California's twelve (12) media markets. After extensive stakeholder input, eleven (11) regions were created. These were named by stakeholders from each geographic area.

- Table 1. *Eligible African American/Black Populations Regions* identifies the geographical regions and counties that are the focus for this RFA.
- Additional RFAs will be released in the future to address tobacco-related disparities among American Indian/Alaska Native communities, people living in rural communities, behavioral health, people with low socioeconomic status, and other priority populations. See Appendix 3. *Initiative to Reduce Tobacco-Related Disparities* for projected timelines.

Table 1. Eligible African American/Black Populations Regions

Region	Counties
1. Bay Area	Alameda, Contra Costa, Marin, San Francisco, San Mateo, Santa Clara, Solano (7)
2. Central Valley[ii]	Fresno, Kern, Kings, Madera, Mariposa, Merced, Tulare (7)
3. Los Angeles	Los Angeles (1)
4. Tri-County South	Imperial, Riverside, and San Bernardino (3)

C. Eligibility Criteria

1. **Organizational Type**
   a) California public or private non-profit entities are eligible to apply for these funds.
   b) Other eligible entities include, but are not limited to: local health departments, hospitals, community clinics, voluntary health organizations, American Indian tribes, colleges and universities, county offices of education, school districts, health maintenance organizations, professional health associations, and professional health education associations.
   c) Applicants claiming private non-profit status must submit proof of their non-profit status with their proposal. Either certification from the State of California, Office of Secretary of State, or a letter from the Department of Treasury, Internal Revenue Service (IRS) classifying the agency as a non-profit agency is acceptable proof. For examples, see Appendix 5: Sample Non-Profit Status Letter.
   d) Non-Local Lead Agencies (LLA) Applicants: May submit an Application reflecting a consortium of up to three (3) agencies, including the prime Applicant. Each member of the consortium must be located and/or working in

[ii] This region will be eligible to apply for funding from the Rural Regional Initiative when that solicitation is released in 2018.

one or more of the counties within the region. Consortium partners do not need to be funded equally. If a consortium application is submitted, the lead organization must be the Applicant that will serve as the administrative hub for the consortium partners.

e) LLA Applicants: Pursuant to H&S Code Section 104440, **Local Lead Agencies are ineligible for awards under the competitive grants program unless the Applicant is a participant within a consortium of community-based organizations or non-profit agencies.** If a consortium application includes a LLA, the LLA must be the Applicant agency and serve as the administrative hub for the consortium partners. Consortium partners do not need to be funded equally. A LLA consortium Applicant should include no more than two additional partners. **In a LLA consortium application, the LLA may not be the recipient of more than one-third of the budget request**.

f) State of California agencies other than state universities, colleges, and community colleges are not eligible.

g) Agencies that previously applied for RFA #17-10569 are eligible to apply.

2. **Geographical African American/Black Populations Project Regions**

a) Applications must propose to conduct the tobacco use prevention and reduction activities focused on African American/Black populations within the specific geographical regions identified in Table 1. *Eligible African American/Black Populations Regions*. Applicants may more than one application to address multiple regions; if an Applicant proposes to work in more than one geographical area, the Applicant must submit a separate application for each geographical area to be served. For example, if an Applicant is proposing to serve the African American/Black communities in the Bay Area and the Los Angeles regions, two applications must be submitted.This RFA does not guarantee that an application will be funded for each of the regions identified in Table 1. If no applications are received for the African American/Black populations within a region, or if an application does not receive a passing score, this RFA will not be reissued.

3. **Agency Qualifications**

Applicant agencies must have, at a minimum:

a) An office that has been physically located, for at least three (3) years, in the geographical region proposed to be served.

b) Three (3) years of experience working with the African American/Black populations.

c) Two (2) years of experience in program monitoring, including data collection and reporting of performance measures.

d) Three (3) years of experience developing community linkages and/or participating in and maintaining stakeholder groups.

4. **Certify No Tobacco Industry Conflict**
   To avoid any real or apparent conflict of interest on the part of the proposed Awardee or any of its proposed subcontractors, employees, officers and directors of the Applicant or its proposed subcontractors, Applicant certification to this effect is required at the time the application is submitted (see Appendix 6: *Certification of Non-Acceptance of Tobacco Funds*).

   With regard to universities or colleges, the Principal Investigator (PI) of the university or college must certify that he/she or any of the investigators associated with the contract (either paid, voluntary, or in kind) have not received funding from nor had an affiliation or contractual relationship with a tobacco company, any of its subsidiaries, or parent company within the last five (5) years prior to the start date of the contract period. In addition, the PI of the university or college must certify that he/she or any of the investigators associated with this grant will not accept funding from, nor have an affiliation or contractual relationship with a tobacco company, any of its subsidiaries, or parent company during the term of the grant with CTCP. The PI's certification to this effect is required at the time the application is submitted.

D. Agreement Term and Funding Availability

1. **Funding Term**
   a) The term of the Agreement is expected to be 60 months and is anticipated to be March 1, 2019 – February 29, 2024. The Agreement term may change if CDPH/CTCP makes the awards earlier than expected or if CDPH/CTCP cannot execute Agreements in a timely manner due to unforeseen delays.
   b) The resulting Agreement will be of no force or effect until it is signed by both parties and approved by CDPH. The Awardee is cautioned not to commence performance until all approvals are obtained. Should performance commence before all approvals are obtained, said services may be considered to have been volunteered without State reimbursement.
   c) CDPH/CTCP reserves the right to modify the term of the resulting Agreement via a formal amendment process to modify the SOW or budget based on changes in a rapidly evolving tobacco control environment.

2. **Funding Amount**
   The total amount to be distributed among Awardees is anticipated to be **$6,705,540** for 60 months. Table 2. *Maximum Annual Funding per Region for FY 18/19-FY 23/24* identifies the maximum budget for each fiscal year by region. Grant awards are subject to applicable approvals. CDPH/CTCP reserves the right to initiate amendments as necessary to redistribute funds between fiscal years to meet the needs of the State. Awardees should not anticipate that unspent funds will be rolled forward from one fiscal year to the next.

Table 2. Maximum Annual Funding per Region for FY 18/19-FY 23/24

Fiscal Year	Bay Area	Central Valley	Los Angeles	Tri-County South
FY 18/19	$113,892	$91,376	$137,515	$104,253
FY 19/20	$341,676	$274,128	$412,546	$312,758
FY 20/21	$341,676	$274,128	$412,546	$312,758
FY 21/22	$341,676	$274,128	$412,546	$312,758
FY 22/23	$341,676	$274,128	$412,546	$312,758
FY 23/24	$227,784	$182,752	$275,031	$208,505
TOTAL = Max Amount for 60 Months	**$1,708,380**	**$1,370,640**	**$2,062,730**	**$1,563,790**

3. **Funding Augment**
   a) At its sole discretion, CDPH shall have the option to provide additional funding to a project, beginning in FY 18/19, not to exceed ten (10) percent of the grant amount, per FY. This funding may only be used to augment the scope of the Project set forth in Exhibit A, Attachment 1, of the grant award, and in no case shall materially alter the Scope of Work (SOW). No amendment or variation of the terms of this Grant shall be valid unless made in writing, signed by the parties, and approved as required.
   b) Additional funding is contingent upon available revenues, and appropriations by the Legislature and the Governor. CDPH/CTCP reserves the right to modify additional work with the successful Applicant that is consistent with the work components identified in Part III. Program Requirements, should additional funding become available.
   c) If the decline in Prop 56 revenue is greater than projected by CDPH/CTCP, necessitating a reduction in grant awards, all grants will be equally reduced by a proportional amount (e.g., ten percent across all grants), except in the case where a Awardee has two (2) or more disapproved progress reports. In that case, a grant may be terminated in lieu of a percentage reduction.

4. **Funding Availability**
   Funding and payment for performance under the resulting grant are dependent upon availability of future appropriations by the State Legislature and the Governor. No legal liability on the part of the State for any payment may arise under the resulting grant until funds are made available through an annual appropriation in the Budget Act.

5. **Funding Source(s)**
   The source of funding is Prop 56, the *California Healthcare, Research, and Prevention Tobacco Act of 2016*.

E. Timeline and Award Schedule

Key dates are presented in Table 3. *Tentative RFA Timeline and Award Schedule*. CDPH/CTCP reserves the right to adjust any date and/or time as necessary. Date and time adjustments will be posted to the CDPH/CTCP TCFOR website.

Table 3. Tentative RFA Timeline and Award Schedule

Key Action	Date and Times All times in Pacific Time (PT)
OTIS Open for Application Input	June 28, 2018
RFA Informational Webinar	July 11, 2018 9:00 a.m.
Mandatory Letter of Intent Due Date	July 13, 2018 5:00 p.m.
Last Day to Submit Written Questions	July 16, 2018 5:00 p.m.
Responses to Written Questions Posted	July 23, 2018 5:00 p.m.
Applications Due	August 15, 2018 5:00 p.m.
Awards Posted on TCFOR	October 3, 2018 5:00 p.m.
Intent to Appeal Letter Due	October 10, 2018 5:00 p.m.
Final Announcement of Awards	November 2, 2018[iii]
Grant Modification Period Ends	December 14, 2018
Submit Finalized Grant Documents to CDPH Contracts Management Unit	February 19, 2019
Grant Start Date	March 1, 2019
Grant End Date	February 29, 2024

F. Applicant Questions and Reporting of Errors in the RFA

CDPH/CTCP will accept questions and reporting of errors related to this RFA. Questions may include, but are not limited to, clarification of eligibility, the regions, or about the instructions, requirements, or RFA materials. **All Applicants must follow the process below to submit a question. CDPH/CTCP will not respond to questions directed to individual CDPH/CTCP employees.**

Applicants that fail to report a known or suspected problem with this RFA and/or its accompanying materials or fail to seek clarification or correction of the RFA and/or its accompanying materials shall submit an application at their own risk. In addition, if an award is made, the successful Applicant shall not be entitled to additional

[iii] Final Award cannot be made until all appeals have been resolved.

compensation for any additional work caused by such a problem, including any ambiguity, conflict, discrepancy, omission, misinterpretation, or error.

1. **How to Submit Questions or Report an Error in this RFA**
   a) Submit questions or errors by email (CTCPInbox@cdph.ca.gov) by the dates specified in Table 3. *Tentative RFA Timeline and Award Schedule* with the subject line "CTCP RFA #18-10134." Verbal questions will not be accepted.
   b) CDPH/CTCP will send an email to confirm receipt of written questions. If confirmation is not received, Applicants may resubmit or call (916) 449-5500 prior to the stated deadline to confirm receipt of the questions by CDPH/CTCP.
   c) Submit written questions to CDPH/CTCP by the date and time specified in Table 3.
   d) Errors in the RFA or its instructions may be reported up to the application submission due date.

2. **What to Include in an Inquiry**
   a) Name of inquirer, name of the organization represented, mailing address, area code and telephone number, and email address.
   b) A description of the subject, concern, or issue in question or RFA discrepancy found.
   c) RFA section, page number, and other information useful in identifying the specific problem, concern, or issue in question.
   d) Proposed remedy sought or suggested, if any.

3. **Response by CDPH/CTCP**
   a) CDPH/CTCP reserves the right to seek clarification of any inquiry received and to answer only questions considered relevant to this RFA. At its discretion, CDPH/CTCP may consolidate and/or paraphrase similar or related inquiries.
   b) Questions and answers received through the process outlined will be published on the TCFOR website on the date identified in Table 3. Verbal questions will not be accepted. All questions must be transmitted in written form according to the instructions here.
   c) CDPH/CTCP may issue an addendum to address errors in the RFA until the application submission deadline. These will be posted on the TCFOR website.

Part III. Program Requirements

A. Scope of Work – Intervention Plan

1. **Recommended Scope of Work Activities**
   The most competitive Applications will be those that include the following requirements:

a) Scope of Work (SOW): Develop a five-year SOW that is consistent with the purpose of the RFA and utilizes **a regional approach** to reduce tobacco-related health disparities and achieve health equity among the African American/Black populations. The SOW is to be commensurate with the costs included in the budget and budget justification. See Appendix 7: *Sample Scope of Work and Evaluation Plan* for more details.

b) Three Objectives Requirement: Include a minimum of three objectives that are consistent with the list of indicators and assets in Appendix 8: *2016 Communities of Excellence (CX) Indicator and Assets List*. Each objective should be specific, measurable, attainable, reasonable, and timely (SMART), and describes the expected outcome of activities.

1) One (1) objective must address at least one (1) indicator identified in Table 4. *Tobacco-Related Disparities Indicators.*

2) No more than one (1) objective may be based on an Asset and the majority of effort and percent deliverables should be directed toward Indicator-based objectives.

3) Objectives based on policy-focused indicators must identify at least three (3) jurisdictions that the Applicant will work in to demonstrate that the objective employs a regional approach to reduce tobacco-related health disparities and achieve health equity among the African American/Black Populations.

4) Please note, LLAs are also required to include an objective addressing one of the indicators in their *2017–2021 Comprehensive Tobacco Control Plan*. It is highly recommended that Applicants to this RFA contact the LLAs in the regions they propose to work to coordinate policy and system change initiatives to avoid duplication of effort. See *List of CTCP Local Lead Agencies* for LLA contact information.

Table 4. Tobacco-Related Disparities Indicators

Health Equity Policy Focus	Communities of Excellence Indicator
1. Restrict Tobacco Retailer Density and Proximity of Tobacco Retailers to Each Other and Near Schools or Other Youth Sensitive Areas	**3.2.2 Tobacco Retailer Density/Zoning:** The number of jurisdictions with a policy restricting the number, location, and/or density of tobacco (including ESD) retail outlets through use of any of the following means: conditional use permits, zoning, tobacco retail permits or licenses, or direct regulation.
2. Prohibit the Sale of Menthol Cigarettes and Other	**3.2.9 Menthol and Other Flavored Tobacco Products:** The number of jurisdictions with a policy restricting or prohibiting the sale and/or distribution

Health Equity Policy Focus	Communities of Excellence Indicator
Flavored Tobacco Product Sales	of any mentholated cigarettes and other flavored tobacco (including ESD) products, and paraphernalia (e.g., smokeless tobacco products, dissolvable tobacco products, flavored premium cigars, little cigars, cigarillos, hookah tobacco, e-cigarettes, e-hookah, wrappers).
3. Establish a Minimum Floor Price on Tobacco Products	**1.2.6 Minimum Retail Price:** The number of jurisdictions with a policy setting a minimum retail sale price for tobacco products or banning, or constraining tobacco industry promotional practices such as buy downs, multi-pack offers, and discounts, consistent with the First Amendment and federal law.
4. Establish Smoke-free Health Care and Behavioral Health Campuses	**2.2.10 Smoke-free Health Care Campuses:** The number of jurisdictions with a policy prohibiting smoking indoors and outdoors, at all times, on the premises of licensed health care and/or assisted living facilities at all times, (e.g., hospitals, other acute health care facilities, drug and rehab facilities, mental health facilities, adult daycare or residential facilities, social rehabilitation facilities, adult group homes, assisted living facilities, skilled nursing facilities, doctors' offices). **4.2.4 Behavioral Health Cessation Treatment Programs:** The number of alcohol and drug treatment programs, mental health treatment programs, migrant clinics, and other health or social service agencies that have systematically implemented evidence-based tobacco cessation treatment, consistent with the U.S. Public Health Service Clinical Practice Guidelines, Treating Tobacco Use and Dependence (2015 Update).
5. Establish Smoke-free Community Colleges, Technical Schools, and Trade School Campuses	**2.2.9 Smoke-free Outdoor Non-recreational Public Areas:** The number of jurisdictions with a policy prohibiting smoking on the premise of outdoor non-recreational public areas (e.g., walkways, streets, plazas, college/trade school campuses, shopping centers, transit stops, farmers' markets, swap meets).
6. Establish Smoke-free Home Policies within Multi-Unit Housing	**2.2.13 Smoke-free Multi-Unit Housing**: The number of jurisdictions with a public policy prohibiting smoking in the individual units of multi-unit housing, including balconies and patios.

Health Equity Policy Focus	Communities of Excellence Indicator
7. Identify and Treat Tobacco Users, particularly Medi-Cal Beneficiaries and the Uninsured	**4.1.4 Cessation Assessment and Referral Systems**: The extent to which health care, social service, housing and education agencies systematically refer patients and clients to accessible, evidence-based tobacco cessation programs such as the California Smokers' Helpline.

c) Comprehensive Roadmap Requirement: Provide a comprehensive and detailed "road map" for the grant project that describes what will be done, how much will be done, where activities will occur, what methods will be used, when activities will occur, identifies responsible parties, which tracking measures will be provided to verify completion of activities, and includes a range of coordination/collaboration, educational, policy, and training strategies.

d) New and Strengthen Existing Networks Requirement: Create new and strengthen existing networks of agencies and organizations to work on a shared agenda of tobacco use prevention and reduction.

e) Engagement and Mobilization of Community Residents Requirement: Engage and mobilize community residents to advocate on their behalf for tobacco use prevention, countering of tobacco marketing, and policy and systems changes.

f) Policy and Systems Change Requirement: Implement, support, and evaluate policy and systems change campaigns focused on tobacco use prevention and reduction within the African American/Black populations. Campaigns are to address one (1) or more of the following goal areas:
- Limit Tobacco Promoting Influences;
- Reduce Exposure to Secondhand Smoke, Tobacco Smoke Residue, Tobacco Waste, and Other Tobacco Products;
- Reduce the Availability of Tobacco, including Emerging Products;
- Promote Tobacco Cessation. However, applications that focus solely on cessation will not be reviewed. Applications may allocate up to 10 percent of their proposed budget towards the provision of direct cessation services (e.g., cessation classes). Grant funds may not be used to pay for pharmacotherapy such as nicotine replacement therapy.

F. Integrated Approaches to Tobacco Control Requirement: The Applicant will partner with other public health, social service, employment, housing, etc. programs to facilitate an integrated approach to tobacco control efforts which may include joint trainings, participation in evaluation and surveillance (e.g., store surveys, Key Informant Interviews, Public Intercept Surveys), and cross-participation in coalitions.

G. Coordination/Collaboration with CTCP-Funded Projects Requirement: The SOW must reflect coordination/collaboration with other local and statewide tobacco control partners such as LLAs, CTCP 15-100 Competitive Awardees, California Smokers' Helpline, The Center for Tobacco Cessation, The Center for Tobacco Policy and Organizing (The Center), ChangeLab Solutions, California Youth Advocacy Network, Tobacco Control Evaluation Center, Rover Library, The LOOP, the Tobacco Education Clearinghouse of California, the regional priority population projects funded under RFA #17-10569 and the priority population Statewide Coordinating Centers funded under RFA #17-10593. See *List of CTCP Local Lead Agencies* and Appendix 9: *CTCP-funded Statewide Training & Technical Assistance Providers.*

H. Community-Focused and Culturally Appropriate Activities Requirement: Use community-focused and culturally appropriate health education, health promotion, and advocacy activities that will result in policy, system, and/or environmental changes. Activities should include engaging and mobilizing the African American/Black communities, and developing tobacco control advocates and community leaders.

I. Midwest Academy Strategy Chart Requirement: For each **voluntary or legislated policy objective**, Applicants are required to include an activity in the intervention plan to conduct a strategic planning session utilizing the Midwest Academy Strategy Chart **within the first six (6) months of their project start date**. See Appendix 10: *Midwest Academy Strategy Chart*. Use the "Wizard" in OTIS (Online Tobacco Information System) to add this activity to the SOW. Wizards are pre-written items that are commonly included in many SOW. See Appendix 11. *Instructions for Accessing the OTIS Activity Wizard* and Appendix 12. *Intervention Activities Sample Wizards* for instructions on how to access OTIS Wizard and a list of sample Wizards.

J. Local Lead Agency Participation: The Applicant will communicate regularly with each of the LLAs in the region to avoid duplication of efforts and at least one Appliant staff member will participate in at least one LLA coalition in the region. Use the "Wizard" in OTIS to add this activity to the SOW.

K. Information and Education (I&E) Day Participation Requirement: Indicate that at least one Awardee staff member will participate in I&E Day which is conducted biennially and planned for Spring 2019 and Spring 2021. During I&E Day, the Prop 56-funded Awardee staff meet with elected officials to educate them about local tobacco control activities. Use the "Wizard" in OTIS to add this activity to the SOW.

L. Local District Day Requirement: Include an activity to recruit volunteers to participate in the African American/Black Statewide Coordinating Center's Local District Day events. The objective of Local District Days is to educate policymakers about key tobacco control issues, especially in regards to how

these issues affect the African American/Black populations. Use the "Wizard" in OTIS to add this activity to the SOW.

M. Healthy Stores for a Healthy Community Requirement: Include an activity in the SOW that supports LLAs in the collection of *Healthy Stores for a Healthy Community* data collection, media events, and educational activities. The data collection is scheduled for the spring of FY 2018/19. Use the "Wizard" in OTIS to add this activity to the SOW.

N. Statewide Evaluation Participation Requirement: The SOW must include an activity to participate in a statewide evaluation of the *Regional Initiative to Mobilize Communities to Reduce Tobacco-Related Disparities among African American/Black, Asian/Pacific Islander, Hispanic/Latino, and Lesbianm Gay, Bisexual, Transgender, and Queer Populations.* This is an intervention activity and there is an OTIS wizard for this activity. CDPH/CTCP will fund an external agency to conduct this evaluation. CDPH/CTCP anticipates that the evaluation will provide information about the overall performance of each individual regional project site and enable evaluation of the entire Initiative. The evaluation will assess: the strength of the SOW and its implementation; regional changes in readiness for communities to address tobacco control policy and system changes; changes in the capacity of funded agencies to address tobacco control policy and system changes; the quality, strength and diversity of partnerships on tobacco control policy and system change efforts; the extent that regional projects accessed training and technical assistance services and collaborative learning opportunities funded by CDPH/CTCP; and the quality and strength of collaboration with LLAs and other funded CDPH/CTCP partners.

The primary aims of the evaluation are to: a) understand the outcomes collectively achieved by this Initiative; b) evaluate how these measures were linked to the achievement of policy and system change objectives and other outcomes (e.g., calls to the California Smokers' Helpline, electronic health record referrals to the California Smokers' Helpline); and c) major facilitators or barriers to tobacco control policy system change in the identified populations and the respective regions.

During the five-year project term, it is anticipated that the evaluation activities will include: a) a minimum of one (1) written survey annually; b) two to three waves of Key Informant Interviews with 3-10 stakeholders within the region; c) one to two waves of focus groups in each region; d) a review of the SOW, progress reports, tracking measures and evaluation reports submitted by regional projects; and e) use of other outcome-related data sets such as the Policy Evaluation Tracking System, California Smokers' Helpline data, etc.

O. Direct Cessation Services Requirement: If the provision of direct tobacco cessation services are proposed, complete and upload the *Cessation*

Identification and Treatment Protocol to the "Additional Documents" section of OTIS. The form is on the Tobacco Control Funding Opportunities and Resources (TCFOR) website under "Related Materials." **Any Applicant proposing provision of direct cessation services for any health or behavioral health care clinic, hospital, long-term care facility, residential treatment facility, etc., is required to include this form with their application.** The form is to provide detailed information describing the cessation delivery site and the current policy and system for the identification and treatment of nicotine addiction. This form asks for the following information for each health care system: 1) a description of the current tobacco use policy; 2) how tobacco users are currently identified and their tobacco use tracked; 3) what cessation pharmacotherapy benefit is provided; 4) what type of cessation counseling is provided; and 5) how cessation services are currently promoted to patients or clients.

P. Media Requirement:

1) Communications Plan: Applicants are required to include an activity to create a Communication Plan **for each objective that includes any paid media activities** using a template provided by CTCP. **The Communication Plan must be submitted within the first six months of the project** through the OTIS progress report system and must be updated annually. The CTCP Media & Communications Section will review the Communications Plan and provide technical assistance as requested. Use the "Wizard" in OTIS to add this activity to the SOW.

2) Advertisement (ad) Testing Requirements: If an objective includes an activity to develop new advertising, the Applicant is required to include an evaluation activity to test the ads with consumers through focus groups, online surveys or other means to ensure that the message is understood, appropriate for the intended audience, and impactful with the target audience.

3) Education Materials Requirement: On a regular basis, the Applicant will submit educational materials developed under the funded project along with testing results (e.g., reading level, consumer focus group results) to the Tobacco Education Clearinghouse of California (TECC) through the TECC website. The TECC model for distributing educational materials changed in 2016 from distributing pre-printed materials to a model in which the user downloads a print-ready version of the material (at no cost) and prints the materials through either an in-house or external printing vendor. Budget accordingly to meet the demands of printing either in-house or through an external print vendor. See Appendix 13: *Tobacco Education Clearinghouse of California (TECC): Available Educational Materials for more information*.

4) Communication Requirements: Applicants are required to engage in the collaborative efforts that contribute to and sustain California's broader tobacco control movement. At minimum, Applicants are required to include activities in their SOW that reflects the following:

   1) Weekly, log onto Partners to identify upcoming trainings, new information and advocacy campaign tools. Monthly, contribute a minimum of one post to InfoHub to share information and foster a learning and networking environment. Annually, write a minimum of one Spotlight On including significant steps taken, milestones achieved and barriers encountered at the completion of the campaign. Use the "Wizard" in OTIS to add this activity to the SOW.

   2) Regularly utilize and refer public health stakeholders to Tobacco-Free California online resources such as the Story of Inequity, Healthy Stores for a Healthy Community, and Flavors Hooks Kids websites.

   3) If direct cessation services are offered, the Applicant will provide information to the California Smokers' Helpline on a regular basis which describes the cessation service provided. Use the "Wizard" in OTIS to add this activity to the SOW.

   4) Activities to educate the community, engage the community, and develop community leaders on tobacco control issues.

   5) Linking tobacco control efforts to other sectors, including, but not limited to nutrition, alcohol control, crime prevention, etc.

B. Scope of Work – Evaluation Plan

1. Deliverable Allocation Requirement: A minimum of 10% of project deliverables should be dedicated to evaluation activities.

2. Qualified Plan Evaluator Provides at Least Four Hours of Consultation Requirement: An evaluation plan must be included for each objective and reflect that a qualified Plan Evaluator provided at least four (4) hours (in total) of consultation on the development of the SOW. The individual designated as the Plan Evaluator must meet the following minimum requirements: 1) completed at least one (1) course in study design or at least one (1) year of experience determining the study design for an evaluation; 2) one (1) course in program evaluation or one (1) year of planning and implementing a program evaluation; 3) completed at least two (2) intermediate courses in statistics; 4) has intermediate or higher proficiency in calculating sample size, developing a sampling scheme, and determining appropriate data collection methods; 5) has intermediate or higher proficiency in evaluating behavior change, policy, or media interventions;

and 6) has intermediate or higher expertise in using statistical software packages to analyze and interpret quantitative data.

3. Primary and Non-Primary Objective Requirement: Designate at least one (1) objective as the "primary objective." The primary objective must be based on one of the indicators listed in Table 4. *Tobacco-Related Disparities Indicators.* A primary objective is one that requires an in-depth evaluation plan in consultation with a qualified evaluator. Evaluation of the primary objective provides valuable knowledge and identifies replicable interventions and strategies to improve future interventions aimed at reducing tobacco-related disparities. A Final Evaluation Report is required for each primary objective that thoroughly describes the intervention, evaluation design, and outcomes. See Appendix 14: *Tell Your Story: Guidelines for Preparing Useful Evaluation Reports* for information regarding the preparation of Final, Brief and Interim Evaluation Reports. For each evaluation activity, there is an appropriate description of the instrument to be used, the topic or focus of the data collection, data collection method, who or what is being sampled, sample size, sampling method, and where the data will be collected.

   The evaluation reporting activity for each objective describes: 1) How the evaluation data will be analyzed; 2) How the findings and Evaluation Report will be disseminated to the community, policymakers, and to public health professionals working in tobacco control (e.g., through a conference presentation or a peer reviewed paper); and 3) The progress report period in which interim and Brief/Final Evaluation Reports will be submitted to CTCP; and any limitations or challenges anticipated with completing the evaluation.

4. Process and Outcome Data Collection Requirement: Appropriate process and outcome data collection strategies must be included to improve the Applicant's activities and measure their outcome and/or impact.

5. Signed Policy Requirement: Applicants are required to upload any final policies adopted by a county, city, tribe, or official board (e.g., fair board, school board, transit board) as a Tracking Measure in the Policy Record activity under the evaluation plan in OTIS with the progress report. Use the "Wizard" in OTIS to add this activity to the SOW.

6. Media Tracking Form: Applicants budgeting for paid media are required to submit the Media Tracking Form with their progress reports. This CTCP form documents placement of paid media and social media and is to be submitted as a tracking measure as part of the Media Record evaluation activity.

7. Media Activity Record Tool Requirement: Applicants budgeting for any media activities (owned, earned, paid) are required to submit the Media Activity Record with their progress report. The Media Activity Record is an evaluation tool that was created by the Tobacco Control Evaluation Center to record more general information about all media activities (including earned) which will be used for

evaluation purposes. The Media Activity Record is to be submitted as a tracking measure as part of the Media Record evaluation activity.

C. Scope of Work – Budget and Budget Justification

1. Submit a budget that does not exceed the recommended annual funding level identified in Table 2. *Maximum Fiscal Year Award*.

   Applicants are required to include the following positions in Table 5. *Required Staffing and Minimum Duties* in the budget and budget justification. Please note an individual staff person funded by CTCP, on one project or on multiple projects, may **not** work more than 1.0 full-time equivalent (FTE) in combined total, without prior written CTCP approval from the Program Consultant and Procurement Manager. For example, consideration of an individual staff person being budgeted at greater than 1.0 FTE may be granted in cases where work is not being accomplished due to a large number of vacancies or an extended absence of a key staff member due to sick leave or maternity leave.

   - Full-Time Project Director/Coordinator Requirement: Designate a 100 percent full-time equivalent (FTE) **Project Director or Project Coordinator** for the project. This should be equivalent to one employee working full-time in this position and should not be divided among more than one employee. This position must be listed as the Primary Tobacco Contact in OTIS, act as the primary day-to-day point of contact for CTCP communication to the project, and regularly access OTIS and Partners. This position is responsible for overall and day-to-day project management of the SOW and Budget, progress reports, invoicing, and; maintenance of required documents for auditing purposes.

     - Project Director/Coordinator Oversight of Project Evaluator Requirement: Designate the Project Director or Project Coordinator to devote a minimum of **10 percent of their full-time position** (equivalent to four hours per week) **to working with and overseeing a qualified Project Evaluator**[iv] to ensure that the evaluation design, sampling, activities, timelines, data analyses, and reporting are completed in a timely and satisfactory manner.

   - Project Evaluator Requirement: Designates a qualified **Project Evaluator** who is responsible for conducting technical aspects of the evaluation including the design, sampling, training of data collectors, data analysis, and summarizing evaluation results. The Project Evaluator must be the minimum of a 10 percent full-time position (e.g., 208 hours per year). See Table 5.

[iv] In OTIS you will see the terms "Plan Evaluator" and "Project Evaluator." The Plan Evaluator is the individual who provides assistance during the development of the initial scope of the work. The Project Evaluator is the individual who provides ongoing assistance to the funded project. The Plan and Project Evaluator may be the same person; however, sometimes agencies will identify a different individual to be the ongoing Project Evaluator.

Required Staffing and Minimum Duties for a description of the minimum qualifications for Project Evaluator.

- Community Engagement Coordinator Requirement: Designate a **Community Engagement Coordinator at a minimum of 50 percent FTE**. This position is responsible for networking and building partnerships with community-based organizations and the LLA.

Table 5. Required Staffing and Minimum Duties

Staffing	Position	Responsibilities
Required: 100 percent FTE	Project Director/Project Coordinator	This position must be listed as the Primary Tobacco Contact in OTIS, acts as the primary day-to-day point of contact for CTCP communication to the agency, and regularly accesses OTIS and Partners. This position is responsible for overall and day-to-day management to implement and evaluate the project; provides oversight of the SOW, Budget, progress reports, and invoices; oversees maintenance of required documents for auditing purposes; and devotes a minimum of 10 percent of a full-time position (equivalent to four hours per week) to overseeing evaluation activities.
Required: Minimum 10 percent FTE	Project Evaluator	This position implements activities such as development of data collection instruments and protocols; provides data collection training; oversees sampling methodology; data analysis; and report writing. Duties may also include assisting with data translation and dissemination of evaluation results. The individual designated as the Project Evaluator must meet the following minimum requirements: 1) at least one (1) course in study design or at least one (1) year of experience determining the study design for an evaluation; 2) have intermediate or higher proficiency in calculating sample size, developing a sampling scheme, and determining appropriate data collection methods; 3) completed one (1) course in program evaluation or one (1) year of planning and implementing a program evaluation; 4) have intermediate or higher proficiency in evaluating behavior change, policy, or media interventions; 5) at least two (2) intermediate courses in statistics; and 6) have

Staffing	Position	Responsibilities
		intermediate or higher expertise in using statistical software packages to analyze and interpret quantitative data.
Required: 50 percent FTE	Community Engagement Coordinator	This position works to broaden community engagement in tobacco control efforts, coordinates with LLAs, and seeks regular consultation with statewide partners to increase coordination and training in the region and implements efforts to ensure and track diversity, engagement, and satisfaction among community members through activities such as tracking the quantity and types of activities in which community members were engaged.

2. Applicants are required to budget for the trainings listed below.

   - CTCP Travel and Training Requirement: A minimum of one participant for the required Travel/Training noted in Table 6. *Required CTCP Travel/Trainings*.
   - Minimum Coordination/Collaboration Travel Requirement: **Annually budget** for 4-5 Statewide Coordinating Center coordination/collaboration meetings, organized and sponsored by African American/Black Coordinating Center.

Table 6. Required Travel/Trainings

CTCP Travel/Training	FY 18-19	FY 19-20	FY 20-21	FY 21-22	FY 22-23	FY 23-24
Tobacco-Free California Projects Meeting		**1**		**1**		**1**
Capitol I&E Training and Day (Sacramento, CA)	**1**		**1**		**1**	
Statewide Coordinating Center Coordination/Collaboration Meetings	**2-3**	**4-5**	**4-5**	**4-5**	**4-5**	**4-5**

Part IV. Application Submission Requirements

A. Mandatory Non-Binding Letter of Intent

1. **Letter of Intent Requirement**
   Any entity intending to submit an application is required to submit a Letter of Intent (LOI) notifying CDPH/CTCP of its intent to submit an application. Those who do not submit a LOI will not be allowed to submit an application. The LOI is not binding and those submitting a LOI are not obligated to submit an application.

2. **Submitting a Letter of Intent**

One (1) signed LOI per application must be uploaded to the TCFOR website by 5:00 p.m. Pacific Time (PT), on the date identified in Table 3. *Tentative RFA Timeline and Award Schedule*. Letters submitted past the deadline will not be considered. It is strongly advised that Applicants submit their LOI prior to the due date in case technical difficulties are encountered. The electronic time stamp will be used to verify on-time submission. Technical difficulties will not relieve the Applicant of meeting the submission deadline. LOIs will NOT be accepted via email, fax, or mail.

The mandatory LOI is part of the "Overview: Applicant Registration Instructions" section on the TCFOR website. The LOI must include the information described below for each application to be submitted.

The Letter of Intent must:

- Be on the Applicant agency's letterhead and signed by an authorized agency signatory or their official agent
- State the name and number of the RFA under which the application will be submitted (Request for Application #18-10134)
- State the geographical region to be addressed by the Application
- State the estimated budget request
- Include a short description of the proposed project

Prepare the letter using word processing software and save the document to your computer as a word document or PDF. To upload the Letter of Intent, refer to the training courses on the Tobacco Control Funding Opportunities and Resources website: http://tcfor.catcp.org (*click 'Training Tutorials' for user instructions)*. For existing OTIS account users, view the training video "TCFOR Process for OTIS account users" and the "TCFOR Process for OTIS Account Users Checklist" for additional information. For Applicants without an OTIS account, view the training video "TCFOR Process for New Applicants" and the "TCFOR Process for New Applicants Checklist" for more information.

Once the Applicant creates a "User Account" and "Request to Apply" for the funding opportunity, a LOI can be uploaded. For technical assistance with uploading the LOI, call Humberto Jurado at (916) 449-5474. Please do not wait until 4:00 p.m. of the submission due date to ask for assistance, as he may assisting others.

B. Informational Webinar

CDPH/CTCP has scheduled an optional Online GoToTraining© Informational Webinar. The **RFA Informational Webinar** will be on **Wednesday July 11, 2018 at 9:00 a.m. PT**. Those intending to submit an application are strongly encouraged to participate. The purpose of the Informational Webinar is to provide interested parties

with an opportunity to ask questions about the preparation and submission of the application. The Informational Webinar access code is posted at the TCFOR website. Questions must be submitted in writing to CTCPInbox@cdph.ca.gov by the date and time identified in Table 3. *Tentative RFA Timeline and Award Schedule,* or via the chatbox during the webinar. Responses to written questions submitted prior to and during the webinar (through the chatbox) will be answered as time allows following the RFA overview presentation. Written responses to all questions submitted by the deadline will be posted on TCFOR by the date and time identified in Table 3. *Tentative RFA Timeline and Award Schedule.*

C. Application Technical Assistance Resources

CDPH/CTCP funds several statewide projects that provide training and technical assistance. The projects listed in Appendix 9: *CTCP-Funded Statewide Training & Technical Assistance Providers* are funded to provide assistance to agencies as they develop their application in response to this RFA.

D. Application Submission

Applications are due by the date and time listed in Table 3. Tentative RFA Timeline and Award Schedule. Applications are to be submitted through OTIS. Applications received after the due date/time will not be reviewed. Submission before the deadline date is advised in case you experience technical difficulties with submitting your application through OTIS. The OTIS electronic time stamp will be used to verify on-time submission. Technical difficulties will not relieve the Applicant of meeting the submission deadline. Please be aware that OTIS includes an electronic submission check system that will prevent submission of an application that does not meet minimum submission requirements (e.g., required form not completed). CTCP may not be able to respond to your requests for help on the deadline date.

For technical assistance regarding the use of the TCFOR or OTIS websites contact: Humberto Jurado at (916) 449-5474. Please do not wait until 4:00 p.m. of the submission due date to ask for assistance, as he may be assisting others.

Part V. Application Submission Process

A. Description of the Online Tobacco Information System (OTIS)

1. **What is OTIS?**
   Responses to this RFA shall be submitted through OTIS. OTIS is a secure, passcode protected knowledge management system that is used to submit applications, review and score applications, modify the SOW and budget, and submit and approve progress reports. The system is accessible 24 hours per day, seven days per week, and provides access to several reports and a communication system. Applicants and Awardees are required to use OTIS for

the submission of their applications, progress reports, and maintaining grant-related communications.

2. **What help is available for using OTIS?**
   a) User Account Instructions: For guidance on how to submit an "Applicant Registration" form and LOI, and create an OTIS "User Account," see the *Application Registration Instructions* found on the TCFOR Overview webpage.
   b) Webinar Training: The Informational Webinar will review the requirements of this RFA; provide information on requesting a "User Account," and how to use OTIS.
   c) Web-based Tutorial: OTIS includes a web-based training tutorial entitled, *Creating Your Application/Plan*. This training explains how to use the system and instructions for completing each of the application components. See Appendix 15: *Instructions for Accessing the OTIS Applicant Training Course: Creating Your Application/Plan.*
   d) OTIS Page Guides: OTIS includes Page Guides, which provide information clarifying how to complete requested information. Page Guides are accessible from the page you are completing and allow you to access help without leaving the page you are working on.
   e) OTIS Wizards: OTIS wizards are available for objectives, intervention, evaluation, and budget activities. These are pre-written items that are common to many applications. They can be inserted into the SOW and tailored to the Applicant's project.
   f) Telephone Assistance: Call Humberto Jurado at (916) 449-5474.

B. OTIS Application Instructions: Contact Information

COMPLETE THE CONTACT INFORMATION

The purpose of this section is to collect information about the Applicant, the geographic service area of the proposed project, proposed project director, agency fiscal contacts, and Official Agency Signatory. Input the requested information into the Contact Information section in OTIS.

1. My Agency: Provide the Applicant's name, phone and fax numbers, physical and mailing addresses, Federal Employer Identification Number, and the health jurisdiction in which the Applicant is located. The 58 counties and 3 cities of Berkeley, Long Beach, and Pasadena are designated as health jurisdictions.

2. Contact Information: Provide specific contact information for: Project Director, Primary Tobacco Contact, Agency Fiscal Officer, Day-to-Day Fiscal Contact, and Official Agency Signatory.

C. OTIS Application Instructions: Applicant Capability

APPLICANT CAPABILITY

This section provides information regarding the Applicant's ability to successfully implement the proposed tobacco control project. The Applicant needs to demonstrate its organizational capacity based on current and past successes, and lessons learned. Please respond to each item below. In some responses, the Applicant should also address the capacity of significant subcontractors and consultants.

1. **Program Experience**
   a) Agency Mission: Briefly describe how the Applicant's mission, types of programs and services, targeted audiences, groups and organizations that the Applicant typically works with are consistent with the goals of this RFA.

   b) Demonstrated Access and Work with the African American/Black Populations: Describe: 1) the length of time the Applicant has worked with the African American/Black populations in the region on major issues impacting the populations; 2) at least three (3) years of experience developing community linkages and/or participating in stakeholder groups; 3) previous and current collaborations with agencies, organizations, and community leaders that serve the African American/Black populations; 4) strong partnerships with non-traditional groups (e.g., arts and culture, housing, environment, community development, transportation, social justice, law enforcement, business, substance abuse and mental health treatment, employment, living wage, faith based, youth development); and 5) two to three (2-3) brief examples demonstrating the Applicant's access and community work with the African American/Black populations and any outcomes resulting from this work.

   c) Record of Accomplishment in Public Health Policy and Systems Change: Briefly describe the Applicant's record of accomplishment in the areas of policy and systems change that resulted in meaningful outcomes for the African American/Black populations. Provide two (2) examples that illustrate public health policy or systems change interventions that the Applicant led or participated in as a partner, evaluation activities conducted, and the outcome of these efforts. If any of your public health policy and systems changes work was in the field of tobacco control, please provide at least one example of that work. The Applicant should also demonstrate that they have at least two (2) years of experience in program monitoring, including data collection, and reporting of performance measures.

   d) Program Staffing: Describe the 1) formal educational background; 2) professional experience, including the length of time worked on projects to create policy, systems, or environmental changes; and 3) how the staff and

subcontractors (if applicable) have the necessary qualifications and experience to successfully implement and evaluate a project designed to accelerate the adoption, implementation and impact of policy, systems, or environmental change.

2. **Organizational Start Up and Equipment**
   a) Organizational Start Up: Describe the Applicant's primary physical office space and location for the proposed project; length of time the Applicant's primary physical address in the geographical region; capacity to operate regionally; capability and resources to start up and begin implementation of activities within six weeks of the grant start date and to primarily deliver services Monday through Friday between the hours of 8:00 a.m. and 5:00 p.m., Pacific Time (PT).
   b) Equipment: Describe the existing office equipment, computer equipment, software, and other communication equipment that the Applicant and subcontractors and/or consultants (if applicable) have available for use under the term of the grant and which will be made available to the staff on this project to use. In the description provide information about:
      i. The number and type of equipment available to staff on the project to use (e.g., desks, chairs, facsimile machines, personal computers, printers, reproduction/duplication/copiers, scanners, etc.).
      ii. The type of computer software and applications the Applicant has for tasks such as email, word processing, spreadsheets, PowerPoints, databases, web-conferencing, website development, and reliable access to the Internet.
      iii. Approximately when the computer equipment was purchased.
      iv. The availability (e.g., 100 percent, 50 percent, 25 percent, etc.) for use by staff proposed for this project, if funded.

3. **Administrative/Fiscal Experience and Audit History**
   a) Administrative Staffing: Describe the Applicant's current administrative staffing pattern for activities such as contract and grant management and oversight, payroll, bookkeeping, invoicing, and tracking of contractual, administrative, and fiscal controls. Describe the educational background and qualifications of key administrative staff; including their experience with monitoring government funds, and overseeing and managing the administrative and contractual functions of subcontractors and/or consultants.

   b) Fiscal and Contract/Grant Compliance: Describe the Applicant's performance within the last three (3) years with the management of government and/or non-government funds and activities, including administrative, fiscal, program, and evaluation functions such as: timely and accurate completion of deliverables; submission of fiscal, program, and evaluation documentation; subcontract/consultant monitoring; compliance with government requirements; and fiscal ability to manage payments in arrears.

c) Audit History: Describe the Applicant's fiscal and (if any) programmatic audit history within the last three (3) years. Information is to include frequency of the audits, dates of the audits, and a summary of the audit findings. Thoroughly explain any negative audit findings and their resolution. If the Applicant was audited by a governmental agency within the last three (3) years, provide the name of the government agency, the agency's contact person and phone number, the year the audit was conducted, and the audit findings and resolution.

d) Tax Debtor List Requirements: All Applicants must address the requirements of the Tax Debtor List to meet the requirements of Public Contract Code Section 10295.4. Vendors are ineligible to enter into, or renew any contract with the state for goods or services if a vendor is delinquent on paying state income tax in excess of $100,000 to the California Franchise Tax Board. Prior to submitting a bid or proposal and prior to executing any state contract or renewal of goods or services, a vendor must certify that it is not on the list of ineligible vendors prohibited from doing business with the State of California. During the bid evaluation, it is the buyer's responsibility to check the list of ineligible vendors to confirm that the bidder is not on that list. **Follow the instructions in the Additional Documents section of this RFA for required documentation.**

4. Letters of Reference

Solicit, scan, and upload three (3) letters of reference from three (3) separate entities into OTIS. Letters of reference must be addressed to the Applicant. No more than three (3) letters will be accepted. If the Applicant currently receives or has received, funding from a governmental agency, other than CTCP, within the last two years, one of the references **must** be from one of these agencies. Do not include letters of reference from the Applicant's subcontracting partners. Each letter must be on the reference provider's letterhead and include:

- The address, telephone number, e-mail, name, and title of the letter's author.
- A description of the capacity in which the reference provider worked with the Applicant.
- A description of the Applicant's ability to provide interventions and activities that are culturally tailored and responsive to the unique social conditions and identified barriers that characterize the African American/Black population groups.
- The Applicant's ability to fulfill the fiduciary and grants management functions.
- The Applicant's ability to establish and maintain positive collaborative relationships with CDPH/CTCP, statewide funded projects, LLAs, CTCP funded community-based organizations, and new collaborative partnership.

D. OTIS Application Instructions: Evaluator Information

EVALUATOR INFORMATION

1. Select the Plan Evaluator. See the OTIS web-based training unit: *Creating Your Application/Plan;* module: *Evaluator Information* for instructions on how to invite, identify, and select the Plan Evaluator (see Appendix 15: *Instructions for Accessing the OTIS Applicant Training Course: Creating Your Application/ Plan,* for access instructions).
2. After the Plan Evaluator is selected, this individual must complete and independently submit through OTIS the "Certification of the Evaluator's Role in Preparing the SOW." See the OTIS web-based training unit: *Creating Your Application/Plan;* module: *Evaluator Information* for instructions on how to manage the certification. **Note:** Please be sure the Plan Evaluator is aware of this requirement and do not wait until the due date for the evaluator to submit the certification. Technical difficulties will not relieve the Applicant of meeting the submission deadline.

   Applicants must demonstrate the engagement of a qualified Plan Evaluator in the Application who has:
   - Completed at least one (1) course in study design or at least one (1) year of experience determining the study design for an evaluation, one (1) course in program evaluation or one (1) year of planning and implementing a program evaluation, and at least two (2) intermediate courses in statistics;
   - Demonstrates intermediate or higher proficiency in calculating sample size, developing a sampling scheme, determining appropriate data collection methods;
   - Demonstrates intermediate or higher proficiency in evaluating behavior change, policy, or media interventions; and
   - Demonstrates intermediate or higher expertise in using statistical software packages to analyze and interpret quantitative data.

E. OTIS Application Instructions: Scope of Work – Intervention Plan

SCOPE OF WORK (SOW) – INTERVENTION PLAN

1. **Complete the following items pursuant to the OTIS web-based training unit *Creating Your Application/Plan* (see Appendix 15: *Instructions for Accessing the OTIS Applicant Training Course: Creating Your Application/Plan,* for access instructions):**

   a) Project Objective. Identify a specific measureable outcome and the geographic communities (e.g. jurisdiction location) of focus for policy, systems, and environmental change efforts.
   b) Designate one objective as the "Primary Objective."
   c) Identify the Priority Area, Indicators, and Asset (if chosen) associated with the objective.

d) Identify the Target Audiences to be actively engaged in activities. The Target Audiences must appear in the description of activities and relate to the priority population of focus for the application.
e) Identify the Evaluation Design for the objective.
f) Identify Summary Intervention Topics appearing in the SOW.
g) In a brief narrative format, describe the series of activities to be implemented to achieve the objective. Each activity is to briefly describe and quantify what will be done, how much will be done, and who will be involved. It is recommended that the Applicant use the OTIS wizards to get started.
h) Describe specific outreach and tailoring to the African American/Black populations and communities described in the narrative.

2. **For each activity, complete the following information:**
   A. Copyright: Designate if the activities describes a work product that may be copyrighted, (e.g., brochure).
   B. Percent Deliverables: Identify the combination of staff and budget resources necessary to complete the activity. Percent deliverables should be in increments of 0.25 and must equal 100 percent for the entire SOW.
   C. Start/End Dates: Designate the progress report period in which an activity will begin and the date in which the activity will be completed.
   D. Responsible Parties: Identify budgeted personnel (e.g., staff positions, consultants and subcontractors, and non-budgeted entities such as volunteers, advisory council members) responsible for completing activities. Budgeted titles must be consistent with the titles used in the Budget Justification.
   E. Tracking Measures: Identify tracking measures to be submitted to CTCP that substantiate completion of each activity.
      - List no more than two tracking measures per activity.
      - Each tracking measure should be unique and specific to the activity.
      - Do not list the same tracking measure for multiple activities.
      - Tracking measures in which the percent deliverable is greater than zero percent must be designated as being submitted with the progress report. See Appendix 7: *Sample Scopes of Work and Evaluation Plan* for more details.

F. OTIS Application Instructions: Scope of Work – Evaluation Plan

EVALUATION PLAN

1. Evaluation Plan Overview: Prepare the evaluation plan by completing the evaluation section using appropriate process and outcome data collection strategies to improve the intervention and measure the outcome and/or impact of the intervention. OTIS offers the following types of evaluation activities: Focus Groups, Key Informant Interviews, Public Opinion Polls/Intercept Surveys, Education/Participant Surveys, Policy Records, Media Activity Records, Young Adult Tobacco Purchase Survey, and Other Evaluation Activities.

a) Evaluation Activity Narrative: Describe the evaluation activity including: the instrument to be used, topic or focus of the data collection, data collection method, who or what is being sampled, sample size, sampling method, and where the data will be collected
b) Evaluation Activity Fill-in Boxes: For each evaluation activity complete the following information:
   - Identify if the evaluation activity reflects a process, outcome or both process and outcome data collection.
   - Identify how many waves of data collection will occur, (e.g., use (1) wave for continuous data collection such as website analytics or media activity records; use (2) for a pre-post design).
   - Identify if data collectors will be trained to collect data. **If "Yes" a Training Activity must be included in the Intervention Plan** that describes who will be trained, how many will be trained, the length of the training, and the content of the training.
   - Copyright
   - Assignment of a Percent Deliverable
   - Assignment of Start/End Dates
   - Assignment of Responsible Parties
   - Assignment of Tracking Measures to document completion of activities

2. Evaluation Reporting Section: Describe how the evaluation data will be analyzed and disseminated, designate the progress report period in which the Brief Evaluation Report will be submitted to CTCP, assign a percent deliverable for report documents, and describe any limitations or challenges anticipated with completing the evaluation. Similar to the other activities, complete Tracking Measures and Responsible Parties. See Appendix 14: *Tell Your Story: Guidelines for Preparing Useful Evaluation Reports* for guidance.

G. OTIS Application Instructions: Scope of Work – Narrative Summary

NARRATIVE SUMMARY

General Instructions: Complete a Narrative Summry for each objective which provides information tailored to each objective as follows:

Community Assessment Analysis (600-word limit): The Community Assessment Analysis: 1) identifies the specific geographic communities and priority populations to be addressed; 2) strongly justifies with data that the objectives address an important problem of significance to the population of focus; and 3) incorporates substantiated evidence or practice-based approaches to addressing the problem. Applicants may demonstrate the need for the intervention using community needs assessment findings; local, state or national data that describe the problem; or a summary of evidence-based literature and/or community-defined evidence. If the Applicant has worked on a similar objective in the past, describe the scope and outcome of the effort, explain why additional

work is needed or why this attempt will be more successful. To cite data or literature, please state the author, publication title, and year, (e.g., Mamudu, et.al, Public Health Management & Practice, 2016).

The first two sentences of the Community Assessment Analysis narrative must begin with the following statements:

- "This project will primarily address the following priority population of focus: (African American/Black populations)."
- "This project will primarily work in the following geographical communities: (identify the communities and describe the demographics of the community)."

2. Major Intervention Activities (400-word limit): In a narrative format, provide a concise summary of the activities to be implemented, and how these activities will move the objective forward. Describe the sequence of community engagement, community organizing, education, outreach, training, policy, paid and earned media activities that will be implemented to achieve the objective. Explain how members of the community will be engaged and how activities will be tailored to the African American/Black communities.

3. Theory of Change (300 word limit): Describe the underlying rationale for the proposed intervention, either using a formal theory of change or in your own words, explain how and why you think the proposed activities will lead to the desired change described in the objective. Public health frequently relies on formal theories of change; however, it is also acceptable to describe the underlying rationale for the intervention in your own words.

   - What is a theory of change? The underpinning of most effective public health interventions is a theory of change. The theory of change provides an explanation of how and why the proposed intervention will result in the desired change. It communicates that the activities and messages are more than an assortment of messages and activities selected because they are fun or popular with the coalition. The theory of change communicates that a rationale links the activities and supports that collectively these will result in the desired change.
   - What are examples of a theory of change? The following are a few examples of theories of change used in tobacco control. The *Stages of Change Theory* is a theory, which focuses on individual behavior change and is frequently used as the rationale for interventions that motivate and help people quit smoking based on where they are along a continuum of personal readiness to change. Theories of change that help to explain why community education, media, and partnership development lead to the adoption of policies in communities or organizations include *Social Norm Change*, *Community Organizing*, and *Community Readiness* theories. Additional theories of change are in Appendix 16: *Theory at a Glance: A Guide for Health Promotion Practice*. It is a free resource developed by the National Cancer Institute for public health practitioners. This document concisely summarizes

the most commonly used theories, such as the *Diffusions of Innovation Theory, the Health Belief Model*, and *Social Cognitive Theory* and it explains how to incorporate theory into program planning, implementation, and evaluation.

4. Evaluation Summary Narrative (500-word limit): The Evaluation Summary is a summary of the evaluation design, outcome and process evaluation activities to be conducted, a description of how process evaluation activities will be used to improve or tailor the intervention, and a description of the plan to disseminate evaluation findings to others. In a narrative format, briefly provide the following information:

   - What will be accomplished? Describe what will be accomplished as a result of the intervention: How will the community or people in the community be different (e.g., smoke-free multi-unit housing policy adopted, health care providers will use electronic health records to make referrals to the California Smokers' Helpline)?
   - Evaluation Plan Type: State the evaluation plan type (e.g., "policy adoption").
   - Outcome Data Collection: If the SOW includes the collection of outcome data, describe:
     - Design type (experimental, quasi-experimental, or non-experimental);
     - The intervention and control group(s) (if any) (e.g., communities, stores, health care providers) and the number and location (e.g. city or neighborhood) of each group;
     - When measurements will be performed (e.g., post-test only, pre- and post- test);
     - How data will be collected (e.g., document review, observation); and
     - The sampling plan (e.g., simple random sampling, convenience sampling).
   - How do evaluation activities support interventions? Where applicable, explain how specific evaluation activities support particular intervention activities or will be used to help improve or tailor the intervention. For example: "*A Young Adult Tobacco Purchase Survey will be conducted at baseline to illustrate the need for a tobacco retail license (TRL) policy and enforcement, and the data will be used in community education activities; public opinion surveys will be used to demonstrate support for TRL; Key Informant Interviews will be used to develop talking points aimed at policy leaders.*"
   - How will evaluation findings be disseminated? Describe how and to whom evaluation findings will be disseminated.

H. OTIS Application Instructions: Budget and Budget Justification

BUDGET AND BUDGET JUSTIFICATION

Minimum requirements for the budget and budget justification are provided below.

1. Appendix 17 Budget Justification Instructions: Adhere to the budget requirements provided in Part III, Section C, of this document and utilize the eight (8) budget line items provided in the OTIS budget justification index (See Appendix 17: *Budget Justification Instructions for Funding Opportunities* for guidance).

2. Sixty-Month Budget: Develop a 60-month budget based on the implementation of the SOW that is accurate, reasonable and supportable when compared to the activities detailed in the SOW for each fiscal year.

3. SOW Alignment to the Budget: Verify that each activity in the SOW (that results in an expenditure of funds) is reflected in the budget.

4. Maximum Fiscal Year Budget Request: Ensure the total dollar amount for each FY does not exceed the stated maximum amount allowed in the grant (Table 2. Maximum Fiscal Year Award). Do not plan on rolling unspent funds from one fiscal year to the next.

5. Budget Formulas: Provide easy to follow formulas to substantiate how costs were calculated. (The format for formulas are described in Appendix 17: *Budget Justification Instructions for Funding Opportunities* as well as in the OTIS Wizards).

6. Budget: Allocate no more than five (5) percent of the annual budget to Paid Media, which, may include promotion of events and resources on digital media and paid social media, and may not include television advertisements or out-of-home placements.

7. Explain Budget Items with Zero Fund Request: Provide an explanation and include the funding source when zero funds or insufficient funds are budgeted for a standard cost (e.g., in-kind contributions for space, personnel, indirect costs, subcontracts). CTCP reserves the right to completely exclude activities from the SOW and budget implemented with in-kind funds (e.g., federal funds) if the use of those funds obscures the quality, reach, and evaluation of the impact of the tobacco control program efforts.

8. Comparable State Civil Service Salary Requirement or Justification for Higher Salary Rates: Provide personnel costs that reflect salaries comparable to State Civil Service classification rates (associated duties must also be comparable). Salaries that are above comparable State Civil Service classification rates must be completely justified. (See Appendix 18: *Comparable State Civil Service Classifications*).

9. Subcontractors and Consultant Costs: Designate personnel, including Subcontractors and Consultants, full time equivalent (FTE) percentages that are reasonable and based on deliverable amounts connected to the responsible parties in the SOW.

10. Justification of Subcontract/Consultant Costs: Detail and justify any Subcontractor/Consultant costs necessary to implement the SOW activities. Clearly distinguish the responsibilities for each Subcontractor/Consultant from budgeted personnel and link the services to the activities in the SOW. Detail and justify travel costs necessary to implement the SOW and tie to applicable SOW activities. Include the following details:

    - Separately list the name of each subcontractor and/or consultant who will provide the specialized effort directly related to activities in the SOW.
    - Verify each subcontractor and/or consultant listed in this section of the Budget justification is also referenced with the same title in the SOW's "Responsible Parties."

    Provide the following details:

    - Name of each subcontractor and/or consultant. Identify subcontractors and/or consultants, who have not been selected at the time of submission, as "To Be Determined."
    - Explanation on how Applicant obtained each subcontractor and what scoring method or bidding process they used.
    - Description of the activities/services to be performed.
    - Amount of service time in increments of hours, days, weeks, months.
    - Salary or hourly rate.
    - Formula that substantiates how the costs were determined and the total cost.

11. Fringe Benefits: Provide a description of Fringe Benefits for eligible personnel, fully describe each benefit.

12. Equipment: Describe the office equipment, computer equipment, software, and other communication equipment that the Applicant and subcontractors and/or consultants (if applicable) have available for use by the proposed project. Include in the description:
    - The number and type of equipment available (e.g., desks, chairs, facsimile machines, personal computers, printers, reproduction/duplication/copiers, scanners, etc.).
    - Approximately when the computer equipment was purchased.

13. Optional Travel and Training: Listed below are optional trainings that can be included in the proposed budget:

Optional CTCP Travel/Per Diem and Training: The trainings, conferences, and events listed in Table 7 *Optional Travel/Trainings* provide a broad overview of the types of events CTCP has tentatively scheduled and is provided to help Applicants budget sufficient funds for travel and training. The dates, locations, and/or details regarding these events are not currently available. For budget building purposes,

Applicants should budget as if statewide events are conducted in Sacramento and regional events are within 200 miles of the agency. This list does not include trainings or events that may be offered by CTCP Statewide funded agencies.

Table 7. Optional Travel/Trainings

Optional Travel/Training Event	FY 18-19	FY 19-20	FY 20-21	FY 21-22	FY 22-23	FY 23-24
Priority Population Focused						
Health Equity Summit/Roundtables			**1**			
Health Equity/Priority Populations Conference		**1**		**1**		
Rural Strategies Conference			**1**			
Behavioral Health Summit			**1**			
Media Focused						
Spokesperson Training	**1**		**1**			
Media Summit	**1**					
Media/Advertising Planning		**1**				
All Digital All The Time Training		**1**	**1**			
Retail Environment Focused						
Flavored Tobacco Products Conference		**1**				
Regional Flavored Tobacco Products Trainings	**1**		**1**			
Menthol Summit			**1**			
Retail Environment Conference			**1**			
Secondhand Smoke Focused						
Smoke-Free Homes Conference				**1**		**1**
Smoke-Free Multi-Unit Housing Conference			**1**			
Regional Housing Roundtables			**1**			
Strategic Thinking Focused						
Strategy and Endgame Conference		**1**		**1**		
Enforcement Conference			**1**			
Tobacco Waste Summit		**1**				
Community Engagement Focused						
Capitol Information & Education Training		**1**		**1**		**1**
Midwest Academy Strategy Chart Trainings (Regional)	**1**	**1**				
Coalition Trainings	**1**	**1**	**1**	**1**	**1**	**1**
Young Adult Training	**1**					

Optional Travel/Training Event	FY 18-19	FY 19-20	FY 20-21	FY 21-22	FY 22-23	FY 23-24
Evaluation Focused						
Comprehensive Evaluation Training		**1**				
Cessation Focused						
Tobacco Cessation Summit		**1**				
Basic Training						
CTCP Onboarding and Technical Assistance Trainings: Capacity Building, Media, Evaluation, Program Interventions, Progress Reporting, Cost Reporting, Educational Materials Development	**1**	**1**	**1**	**1**	**1**	**1**

- Out-of-State Travel (OST): The OST events listed below identifies potential OST that Applicants may include in the budget. Prior written approval by CTCP is required. Please see Appendix 17: *Budget Justification Instructions for Funding Opportunities* for a description of the required information.

Table 8. Potential Out-of-State Travel Opportunities

Event/Conference (Examples)	Website
American Public Health Association	www.apha.org
National Conference on Tobacco or Health	www.nctoh.org
Clearing the Air Institute	www.clearingtheairinstitute.com
Annual Rural Health Conference	www.ruralhealthweb.org
Gay and Lesbian Medical Association (GMLA) Conference	www.GLMA.org
Annual National Tribal Public Health Summit	www.nihb.org

14. Indirect Expenses: Indirect Expenses must not exceed a maximum of 25 percent of Total Personnel Services (Personnel Costs plus Fringe Benefits) or 15 percent of Total Allowable Direct Costs. Please see Appendix 17: *Budget Justification Instructions for Funding Opportunities* for a more detailed description of Indirect Expenses.

15. The Indirect Rate used by Applicants that are a local health department must not exceed the local health department's FY 2017-18 CDPH approved Indirect Cost Rate (ICR). Local health department that use a Total Allowable Direct Costs as the ICR basis are subject to State Contracting Manual 3.06 restrictions on subcontract administrative

overhead fees which states that only the first $25,000 for each subcontract may be included in the calculation of Total Allowable Direct Costs.

Additional Budget Justification information may be obtained in the following Appendices:

- Appendix 19: *CTCP Program Letter 12-03 Allowed Policy Activities*
- Appendix 20: *Travel Reimbursement Information*

I. OTIS Application Instructions: Additional Documents

ADDITIONAL DOCUMENTS

The purpose of the Additional Documents is to provide CTCP with supplemental information regarding the Applicant. Information concerning Applicant administrative/collaborative activities, additional tobacco control funds, non-acceptance of Tobacco Company funding, and indirect cost recovery will substantiate CTCP agreement requirements. Provide the following additional documents as described below. See Appendix 15: *Instructions for Accessing the OTIS Applicant Training Course: Creating your Application/Plan*, module "Additional Documents" for more information.

1. Additional Tobacco Control Funding: Funds awarded under this RFA may not be used to duplicate or supplant existing services. If the Applicant agency is receiving funds for any tobacco control efforts whether they are from local, state, federal or private sources, the Applicant is required to describe the funding source, amount of funds, the term of the award, and a description of the activities funded. (Uploaded documentation by Applicant) (online form)
2. Certification of Non-Acceptance of Tobacco Company Funding: Complete and upload this form; see Appendix 6: *Certification of Non-Acceptance of Tobacco Funds*
3. Proof of Non-Profit Status: This document is only applicable to non-government non-profit agencies. The Applicant must upload their Proof of Non-Profit Status.
4. Tax Debtor List – *Franchise Tax Board Entity Status Letter:* Generate this letter at the Franchise Tax Board website and upload the letter.
5. California Civil Rights Laws Attachment (DGS/OLS 04) : Complete and upload this form; see Appendix 21: CA Civil Rights Laws Attachment

Part VI. Application Selection Process and Criteria

A. About this Section

This section explains how the applications will be reviewed, evaluated, and scored. Each application will be evaluated and scored based on the responses to the information requested in this RFA. By submitting an application, the Applicant agrees that CDPH/CTCP is authorized to verify any information and any references named in the application. Applications received by CTCP are subject to the provisions of the "California Public Records Act" (Government Code, Section 6250 et seq.) and are not considered confidential upon completion of the selection process.

B. Application Review Process

STAGE ONE: ADMINISTRATIVE AND COMPLETENESS SCREENING

1. CDPH/CTCP will review applications for on-time submission **and** compliance with administrative requirements and completeness. The OTIS electronic time stamp will be used to verify on-time submission.
2. A late or incomplete application will be considered non-responsive and will be disqualified and eliminated from further evaluation.
3. Applications submitted from non-eligible entities will not be reviewed.
4. Applications that focus solely on cessation will not be reviewed.
5. LLA consortium applications that do not meet the minimum requirements for a consortium application will not be reviewed.
6. Omission of any required document or form, failure to use required formats for response, or failure to respond to any requirement may lead to rejection of the application prior to review. For the purpose of administrative screening, required documents include:
    - Certification of Non-Acceptance of Tobacco Company Funds
    - Proof of Non-Profit Status
    - Franchise Tax Board Entity Status Letter
    - CA Civil Rights Laws Attachment

STAGE TWO: APPLICATION SCORING (100 POINTS)

Each application passing Stage One will be evaluated and scored according to the selection criteria by a review committee on a scale of zero to 100 points. The review committee may include representatives of CDPH, other state agencies, and non-scoring subject matter experts. **To be eligible for funding, an application must receive a score of 70 points or more. However, scoring 70 or more does not guarantee funding or funding at the level requested.** CTCP reserves the right to not fund any of the applications received for this RFA. Funding decisions may also be made to ensure:

- No duplication or overlap of efforts with existing CTCP-funded projects.
- Adequate representation of the indicators addressed.
- Balanced representation of the types of organizations funded.

Table 9 describes the maximum point value for each RFA section.

Table 9. Maximum Point Value for RFA Sections

Application Component	Total Point Value
Applicant Capability	27
Scope of Work – Intervention Plan	25
Scope of Work – Evaluation Plan	15
Scope of Work – Narrative Summary	13
Detailed Budget and Budget Justification	20
TOTAL	100

STAGE THREE: NOTIFICATION OF DECISION

Each Applicant will be notified in writing of the funding decision. Applicants may receive, upon emailing the CTCP Inbox (CTCPInbox@cdph.ca.gov), a copy of the scoring summary page that provides the score and overall strengths and weaknesses for each application.

STAGE FOUR: GRANT MODIFICATIONS

CDPH/CTCP reserves the right to reject any proposed project or project component(s). Following the award notification, CDPH/CTCP may require modifications to the application as a condition of the award. The awardee is required to submit a detailed SOW, Budget and Budget Justification in accordance with CDPH/CTCP requirements, which will become part of the final grant. Upon completion and approval of these documents, the grant documents will be submitted to CDPH for execution. All grant document modifications must be complete and accepted by December 14, 2018 or CDPH/CTCP may withdraw the grant award. Work may not commence until the grant is fully executed and any work done before the full execution of the grant will be deemed voluntary.

C. Application Selection Criteria

Table 10. *Scoring Criteria and Rating Points* provides the selection criteria and the associated point value that will be used to evaluate and score applications.

Table 10. Scoring Criteria and Rating Points

APPLICANT CAPABILITY		
Application Component	**Scoring Criterion**	**Points Possible**
Agency Mission	The Applicant demonstrates that 1) its mission, types of programs and services, targeted audiences, groups, and organizations that it typically works with are consistent with the goals of this RFA.	2

Demonstrated Access and work with African American/Black Populations	The Applicant demonstrates: 1) at least three (3) years of experience working with the African American/Black populations in the region on major issues impacting the populations; 2) at least three (3) years of experience developing community linkages and/or participating in stakeholder groups; 3) previous and current collaborations with agencies, organizations, and community leaders that serve the African American/Black populations; 4) strong partnerships with non-traditional groups (e.g., arts and culture, housing, environment, community development, transportation, social justice, law enforcement, business, substance abuse and mental health treatment, employment, living wage, faith based, youth development); and 5) two to three (2-3) brief examples demonstrating the Applicant's access and community work with the African American/Black populations and any outcomes resulting from this work.	4
Record of Accomplishment Demonstrated in Public Health Policy and Systems Change	The Applicant's past performance demonstrates: 1) a strong ongoing record of accomplishment in the areas of policy and systems change that resulted in meaningful outcomes for the African American/Black populations; 2) two (2) examples that illustrate public health policy or systems change interventions that the Applicant led or participated in as a partner, evaluation activities conducted, and the outcome of these efforts, and 3) at least two (2) years of experience in program monitoring, including data collection, and reporting of performance measures.	4
Program Staffing	The Applicant demonstrates that 1) the formal educational background; 2) professional experience, including the length of time worked on projects to create policy, systems, or environmental changes, and 3) staff and subcontractors (if applicable) have the necessary qualifications to successfully implement and evaluate a project designed to accelerate the adoption, implementation and impact of policy, systems, or environmental change.	4

Organizational Start up and Equipment	The Applicant demonstrates: 1) it has appropriate physical office space to operate out of and the capability and resources to start up and begin implementation of activities within six (6) weeks of the grant start date and to primarily deliver services Monday through Friday between the hours of 8 a.m. and 5 p.m., Pacific Time (PT); 2) it has an office that has been physically located in the geographical region proposed to be served for the past three (3) years and the capacity to operate regionally; 3) appropriate hard drive encryption and antiviral software, computer software and applications to support email, word processing, spreadsheets, PowerPoint, databases, web conferencing, website development and reliable Internet access; and 4) it will provide the grant staff with use of agency communication equipment, copy machines, and shared office furniture for meetings; and at least provide 50 percent of desks, chairs, current computer equipment, printers, and software needed for the grant staff.	4
Administrative/Fiscal Experience and Audit History	The Applicant demonstrates: 1) an administrative/fiscal staffing pattern and staff that have the appropriate educational background, skills, and experience to satisfactorily manage all aspects of payroll, bookkeeping, invoicing, subcontract/consultant monitoring, and other administrative and fiscal controls associated with acceptance and management of government funds; 2) three (3) years of satisfactory performance with administrative, fiscal, and program management of government and/or non-government funds; including timely and satisfactory submission of fiscal, program, evaluation, and subcontractor/consultant documents and deliverables, fiscal stability to manage payments in arrears; 3) Applicant's fiscal and (if any) programmatic audit findings from the past three (3) years that includes a thorough explanation of any negative audit findings and their resolutions (if the Applicant was audited by a governmental agency within the last three (3) years, provide the name of the government agency, the agency's contact person and phone number, the year the audit was conducted, and	3

	the audit findings and resolution are provided); and 4) documentation of compliance with Tax Debtor List Requirements in the Additional Documents section in OTIS.	
Letters of Reference	The required three (3) Letters of Reference: 1) are on Agency letterhead and include contact information; 2) describe the capacity in which the reference provider worked with the Applicant; 3) describe the Applicant's ability to provide interventions and activities that are culturally tailored and responsive to the unique social conditions and identified barriers that characterize the African American/Black populations; 4) demonstrate the Applicant's ability to fulfill the fiduciary and grants management functions; and 5) describes the Applicant's ability to establish and maintain positive collaborative partnerships with the CDPH/CTCP, statewide funded projects, LLAs, CTCP funded community-based organizations, and new collaborative partnerships. If the Applicant is currently receiving or has received funding from a governmental agency, other than CTCP, within the last two (2) years, one (1) of the references is from one (1) of these agencies. Letters of Reference are not from the Applicant's subcontracting partners.	3
Evaluator Information Evaluator Qualifications and Certification	The Applicant demonstrates the engagement of a qualified Plan evaluator who has completed: 1) at least one (1) course in study design or at least one (1) year of experience determining the study design for an evaluation; 2) at least one (1) course in program evaluation or one (1) year of planning and implementing a program evaluation; 3) at least two (2) intermediate courses in statistics; 4) has intermediate or higher proficiency in calculating sample size, developing a sampling scheme, and determining appropriate data collection methods; 5) has intermediate or higher proficiency in evaluating behavior change, policy, or media interventions; and 6) has intermediate or higher expertise in using statistical software packages to analyze and interpret quantitative data.	3
	SUBTOTAL	**27**

SCOPE OF WORK - INTERVENTION PLAN		
Application Component	**Scoring Criterion**	**Points Possible**
Objectives	• Include a minimum of three (3) objectives that are SMART and describes the expected outcome of activities; • At least one (1) of the three (3) objectives is designated as the "Primary Objective"; • Objectives must be consistent with the list of indicators and assets in Appendix 8: *2016 Communities of Excellence Indicators and Assets List;* • Include at least one (1) objective relevant to an indicator listed in Table 4. *Tobacco-Related Disparities Indicators;* and • No more than one (1) objective is asset-based and any objective based on a policy-focused indicator identifies at least three (3) jurisdictions within the region to implement policy, systems and environmental change strategies.	5
Required Items	The SOW addresses an important tobacco use issue within the African American/Black populations and includes policy and/or systems change campaigns that demonstrate: • Creating new and strengthening existing networks of agencies and organizations to work on a shared agenda of tobacco use prevention and reduction; • Engagement and mobilization of communities within the African American/Black populations including development of tobacco control advocates and community leaders; • Implementing, supporting, and evaluating policy and systems change campaigns focused on tobacco use prevention and reduction within the African American/Black populations; and • Partnering with other public health, social, employment or housing programs to facilitate an integrated approach where appropriate.	4
Required Items	The SOW is well reasoned, appropriate and describes: • A wide variety of activities (that include community-focused and culturally-appropriate health education, health promotion, and advocacy training activities) that support the objective and progress in a sequential, chronologically appropriate order; • Where activities will occur (e.g., local jurisdiction);	8

	• Sufficient activities (in quantity and magnitude) to justify the proposed level of staffing and proposed outcomes (i.e., how much work will be done); • Priority Areas, Indicators, and Assets (if chosen) associated with the objective; • Target Audiences; • Summary Intervention Topics; • Copyright designation for work products created; • Percent deliverables in increments of 0.25 for a total of 100 percent; • Start/End Dates for which an activity will begin and be completed; • Responsible parties for completion of each activity (e.g., staff positions, subcontractors, consultants, volunteers); and • Tracking Measures to verify completion of activities.	
Required Items	Objectives include activities that demonstrate: • Coordination and collaboration with CTCP statewide training and technical assistance providers, Priority Population Statewide Coordinating Centers, Priority Population Regional Projects, statewide educational campaigns, and other competitive Awardees in the region; • Use of community-focused and culturally appropriate health education, health promotion and advocacy activities; • Completion of the Midwest Academy Strategy Chart activity for each voluntary or legislated policy objective within the first six months of the project; • Regular communication with each of the LLAs in the region to avoid duplication of efforts and participation in LLA tobacco control coalitions throughout the region as time and logistics permit; • At least one Applicant staff will participate in I&E Days for Spring 2019 and Spring 2021; • Recruitment of volunteers to participate in the African American/Black Statewide Coordinating Center's Local District Day Events; • Supporting LLAs in the collection of *Healthy Stores for a Healthy Community* data collection, media events, and educational activities; • Participation in a Statewide Evaluation of the *Regional Initiative to Mobilize Communities to Reduce Tobacco-Related Disparities among African American/Black, Asian/Pacific Islander,*	8

	Hispanic/Latino, and Lesbian, Gay, Bisexual, Transgender and Queer Populations; • Cessation activities proposed are compliant with the RFA (i.e., provision of information to the California Smokers' Helpline, no cessation-only applications, no reimbursement of cessation pharmacotherapy, no reimbursement to health care providers or health care systems to identify and treat nicotine addiction, no supplanting of existing cessation identification and treatment efforts; • Development of a Communications Plan within the first six months of the project for any objective using paid media using a template provided by CTCP; and • Consistent use of the Partners website, including weekly log-ins, monthly use of the InfoHub forum, and the posting of project success stories annually through Spotlight On.	
	SUBTOTAL	**25**

SCOPE OF WORK - EVALUATION PLAN		
Application Component	**Scoring Criterion**	**Points Possible**
Evaluation Plan	An evaluation plan is included for each objective that reflects a qualified Plan Evaluator provided at least four (4) hours of consultation (in total) on the development of the SOW, and the evaluation plan include: • A minimum of ten (10) percent of the total deliverables are allocated towards evaluation activities (e.g., 208 hours per year); and • Appropriate process and outcome data collection strategies to improve activities and measure their outcome and/or impact.	5
	For each evaluation activity, there is an appropriate description of the instrument to be used, the topic or focus of the data collection, data collection method, who or what is being sampled, sample size, sampling method, where the data will be collected, and budgeted and non-budgeted responsible parties.	7
	The evaluation reporting activity for each objective describes: • How the evaluation data will be analyzed; • How the findings and Evaluation Report will be disseminated to the community, policymakers, and to public health professionals working in tobacco	3

SCOPE OF WORK - EVALUATION PLAN		
Application Component	**Scoring Criterion**	**Points Possible**
	control (e.g., through a conference presentation or a peer reviewed paper); • The progress report period in which interim and Brief/Final Evaluation Reports will be submitted to CTCP; and • Any limitations or challenges anticipated with completing the evaluation.	
	SUBTOTAL	**15**

SCOPE OF WORK - NARRATIVE SUMMARY		
Application Component	**Scoring Criterion**	**Points Possible**
Community Assessment Analysis	The Narrative Summary is completed for each objective and the first two sentences of the Community Assessment Analysis narrative begins with the following statements: • "This project will primarily address the following priority population of focus: (list the population)." • "This project will primarily work in the following geographical communities: (identify the communities and describe the demographics of the community)." The Community Assessment Analysis: 1) identifies the specific geographic communities and priority populations to be addressed; 2) strongly justifies with data that the objectives address an important problem of significance to the population of focus; and 3) incorporates substantiated evidence or practice-based approaches to addressing the problem.	4
Major Intervention Activities	The Major Intervention Categories Analysis demonstrates: 1) A concise summary of the activities to be implemented and how these activities will move the objective forward; 2) the sequence of community engagement, community organizing, education, outreach, training, policy, paid and earned media activities that will be implemented to achieve the objective; 3) Explains how members of the community will be engaged; and 4) How activities will be tailored to the community and the priority population of focus.	3

SCOPE OF WORK - NARRATIVE SUMMARY		
Application Component	**Scoring Criterion**	**Points Possible**
Theory of Change	The Theory of Change provides the underlying rationale explaining why the proposed activities will lead to the desired change and achieve the objectives.	2
Evaluation Summary	The Evaluation Summary is appropriate for the objective and activities and describes the following: 1) evaluation design type (e.g., experimental, quasi-experimental, or non-experimental); 2) intervention and control groups (communities, stores, health care providers) if either a quasi or experimental design is used; 3) when outcome measurements will be performed (e.g., pre/post, post-test only); 4) the sampling plan (e.g. simple random sampling, convenience sampling); 5) the specific outcome to be accomplished as a result of the intervention; 6) outcome and process evaluation activities to be conducted; 7) how process evaluation activities will be used to improve or tailor the intervention; and 8) how findings will be disseminated.	4
	SUBTOTAL	**13**

PLAN COMPONENT: BUDGET AND BUDGET JUSTIFICATION		
Application Component	**Scoring Criterion**	**Points Possible**
Budget and Budget Justification	The proposed 60-month budget: 1) Adheres to the instructions provided in Appendix 17: *Budget Justification Instructions for Funding Opportunities* and the OTIS web-based training; 2) Demonstrates that each activity in the SOW that results in an expenditure of funds is reflected in the budget; 3) Does not exceed the stated maximum amount allowed in the grant for each FY; 4) Includes no more than five (5) percent of the annual budget to Paid Media; and 5) Includes all required staffing and minimum duties listed in Table 5. *Required Staffing and Minimum Duties*.	7
	The proposed budget justification narrative includes: 1) Descriptions/explanations for each of the eight (8) line items and the corresponding sub-line items are identified in the OTIS Budget Justification; 2) An explanation and funding source when zero funds or insufficient funds are budgeted for a standard cost; 3) Easy to follow formulas and accurate calculations to substantiate how the costs were calculated (e.g.,	4

PLAN COMPONENT: BUDGET AND BUDGET JUSTIFICATION		
Application Component	**Scoring Criterion**	**Points Possible**
	monthly/unit rates are provided); and 4) If funds from another source are contributing to the implementation of the SOW, budget activities are clearly identified as "In-Kind" and specify the source of the in-kind funding, (e.g., federal funds CDC grant, etc.).	
	The proposed budget and budget justification narrative demonstrates: 1) For non-governmental non-profit agencies only: Salaries that appear high in relationship to state salaries in Appendix 18: *Comparable State Civil Service Classifications* are substantiated with a detailed justification; and 2) The proposed subcontract personnel and consultant costs are reasonable, directly support the proposed SOW, and are consistent with the needs of the project and level of responsibility.	6
	The proposed budget and budget justification narrative demonstrates: 1) Travel and Per Diem costs are reasonable and necessary based on the proposed SOW; 2) All required trainings are budgeted as instructed and clearly justified based on the Applicant's proximity to the event; and 3) For non-governmental non-profit agencies only: Travel and Per Diem costs adhere to rates set by the California Department of Human Resources (CalHR) in Appendix 20: *Travel Reimbursement Information*.	3
	SUBTOTAL	**20**

Part VII. Award Administration Information

A. RFA Defined

The competitive method used for this procurement of services is a RFA. Applications submitted in response to this RFA will be scored and ranked based on the Selection Criteria. Every application must establish in writing the Applicant's ability to perform the RFA tasks.

B. RFA Cancellation and Addendums

If it is in the State's best interest, CDPH/CTCP reserves the right to do any of the following:

- Cancel this RFA;
- Modify this RFA as needed; or,
- Reject any or all applications received in response to this RFA.

If the RFA is modified, CDPH/CTCP will post an Addendum to the TCFOR website. Applicants are responsible for periodically checking the website for updates and may sign-up for email alerts.

C. Immaterial Defect

At its sole discretion, CDPH/CTCP may waive any immaterial defect or deviation contained in an Applicant's application. CDPH/CTCP's waiver shall in no way modify the application or excuse the successful Applicant from full compliance.

D. Grounds to Reject an Application

An Application shall be rejected if:

1. It is received after the exact date and time set for receipt of applications. The OTIS date stamp will be used to verify on-time submission.
2. It contains false or intentionally misleading statements or references which do not support an attribute or condition contended by the Applicant.
3. The application is intended to erroneously and fallaciously mislead the State in its evaluation of the application and the attribute, condition, or capability is a requirement of this RFA.
4. There is a conflict of interest.
5. It contains confidential information.
6. It is not submitted through OTIS and prepared in the mandatory format described.
7. It does not literally comply or it contains caveats that conflict with the RFA and the variation or deviation is not material, or it is otherwise non-responsive.
8. Applicant has been prohibited from contracting with the following Agencies:
   a) Franchise Tax Board
   b) California Department of Tax and Fee Administration (formerly known as the Board of Equalization)
   c) Department of Fair Employment and Housing
9. Applicant has been suspended or barred from RFA or contracting with the state at the following websites:
   a) Secretary of State
   b) Air & Water Polluters pursuant to GC section 4475-4482
   c) Plastic trash bag content noncompliance
   d) Federal Excluded parties List
10. The Applicant has received a substantive negative contract performance from the State.

E. Notice of Awards

1. Upon successful completion of the review process, CDPH/CTCP will post a notice of intent to award funds on the TCFOR website.

2. Upon written request to CDPH/CTCP, Applicants will receive a summary copy of their review-rating sheet by email.

F. Appeal Process

1. Notice of the proposed award shall be posted on the TCFOR website. If any Applicant, prior to the award of a grant, appeals the award, on the grounds that the Applicant would have been awarded the grant had CDPH/CTCP correctly applied the evaluation standard in the RFA, or if CDPH/CTCP followed the evaluation and scoring methods in the RFA, the grant shall not be awarded until either the appeal has been withdrawn or CDPH has decided the matter. It is suggested that the Applicant submit any appeal by certified or registered mail. Only those submitting an application consistent with the requirements of this RFA and are not awarded a grant may appeal. There is no appeal process for applications that are submitted late, noncompliant, or incomplete. No awarded Applicant may appeal the grant award-funding amount.

2. An Applicant may appeal the award decision. The Applicant must submit a notice of intent to appeal to CTCPInbox@cdph.ca.gov by 5:00 p.m. (PST) on the date listed in Table 3. *Tentative RFA Timeline and Award Schedule*. The Applicant shall then have five (5) calendar days to file a detailed written statement specifying the grounds for the appeal and send the Appeal Letter to:

U.S. Mail	**Courier** (e.g., FedEx)
Caroline Peck, MD, MPH, FACOG, Chief Chronic Disease and Injury Control Division California Department of Public Health MS 7206 P.O. Box 997377 Sacramento, CA 95899-7377 Phone: (916) 449-5500	Caroline Peck, MD, MPH, FACOG, Chief Chronic Disease and Injury Control Division California Department of Public Health MS 7206 1616 Capitol Avenue, Suite 74.516 Sacramento, CA 95814 Phone: (916) 449-5500

3. At the sole discretion of the Division Chief, or his/her designee, a hearing may be held. The decision of the Division Chief or his/her designee shall be final. There is no further administrative appeal. Appellants will be notified of decisions regarding the appeal in writing within fifteen (15) working days of the hearing date or the consideration of the written material submitted, if no hearing is conducted.

4. Upon resolution of any appeal and subsequent award of the grant, The Awardee will be required to complete and submit to CDPH/CTCP the required documents listed in section VIII, C. Awardee Required Documents.

G. Disposition of Applications

1. Upon application opening, all documents submitted in response to this RFA will become the property of the State of California, and will be regarded as public

records under the California Public Records Act (Government Code Section 6250 et seq.) and subject to review by the public.
2. Application packages may be returned only at the Agency's expense, unless such expense is waived by CDPH/CTCP.

H. Inspecting or Obtaining Copies of Application Materials

Persons wishing to view or inspect any application or award related materials must follow the Request for Public Records (PRA) process.

Part VIII. Important Administrative Details

A. Cost of Developing the Application

The Applicant is responsible for the cost of developing and submitting an application. This cost cannot be charged to the State.

B. Awardee Requirements

The following are required to enter into a fully executed agreement with CTCP:

1. All CTCP-funded projects and grants are required to:
   a) Utilize OTIS for grant management.
   b) Obtain and maintain an active Partners account. Partners is a web-based communication system. CTCP-funded projects and grants are required to access Partners at least once a week to review weekly updates.
   c) Maintain an active Internet account.

2. The Awardee incurs expenses for the previous work period and is then reimbursed by invoice(s) submitted to CTCP no more than once per month. The State has up to 45 days to pay invoices for Awardees that are approved for "prompt payment." To learn more about the prompt payment program please visit the Department of General Services website.

3. The Awardee shall employ fiscal/administrative staff with the appropriate training and experience to maintain fiscal accountability and track grant funds. Staff shall be knowledgeable of and practice: standard accounting and payroll practices (including state and federal tax withholding requirements), maintenance of fiscal/administrative records/documents, appropriate tracking and review/approval of expenditures, and other administrative policies and procedures which will maintain the fiscal integrity of the funds awarded to the Awardee.

4. The Awardee should maintain accounting records that reflect actual expenditures including, but not limited to accounting books, ledgers, documents, and payroll records, including signed timesheets, etc., and will follow standard accounting

procedures and practices that properly reflect all direct and indirect expenses related to the grant. Prop 56, subsection 30130.56 (a) states that the California State Auditor shall at least biennially conduct an independent financial audit of the state and local agencies who are recipients of Prop 56 funds. As such, The Awardee is to maintain fiscal and program records documenting expenditures and program implementation for three years beyond the date of the final grant payment.

5. For each subcontract of $5,000 or more, Applicants are required to follow these instructions:

   a) When the amount of the subcontract agreement is $5,000 or more, the prime agency must submit their competitive bid process to CDPH/CTCP for approval before making an award.

   b) When the Applicant subcontracts 60 percent or more of their award to another entity, CDPH/CTCP must approve a detailed line-item budget, in OTIS, for the subcontractor.

   c) Once CDPH/CTCP approves the competitive bid process <u>and</u> the subcontractor selection for agreements $5,000 or more, the prime agency is responsible for submitting a "Subcontract Agreement Transmittal Form" into the Online Tobacco Information System (OTIS) for each subcontract agreement. The prime agency must also retain a copy of the competitive bid process and subcontract agreement that includes a detailed SOW and Budget/Budget Justification.

6. The Awardee is required to expend the grant funds to implement the agreed upon SOW and consistent with Appendix 17: *Budget Justification Instructions for Funding Opportunities*, Appendix 19*: CTCP Program Letter 12-03 Allowed Policy Activities,* Appendix 22: *Local Lead Agency and Competitive Grantee Policy Manual* and Appendix 23: *PL 18-01 Incentive Materials*. The *Local Lead Agency and Competitive Grantee Policy Manual* is located in OTIS under the Training Tab and User Manual, where users are be able to view and download the latest version of the policy manual as a PDF file.

C. Awardee Required Documents

Upon award of the grant, the Awardee will be required to complete and submit to the awarding agency:

1. The Payee Data Record (STD 204), to determine if the Awardee is subject to state income tax withholding pursuant to California Revenue and Taxation Code Sections 18662 and 26131.
2. Page one (1) of the Contractor Certification Clauses (CCC 04/2017), which is a Department of General Services form.
3. Evidence of commercial general liability insurance.

4. Establish the Headquarters for State Travel Reimbursement for budgeted staff and subcontractors/consultants.
5. Board Resolution – all local government agencies are required to submit a Board Resolution with each grant. Resolutions must be submitted after notice of award and prior to full execution of grant. Resolutions must indicate local government approval of the grant.

D. Standard Payroll and Fiscal Documents

The Awardee shall maintain adequate employee time recording documents (e.g., timesheets, time cards, and payroll schedules) and fiscal documents based on Generally Accepted Accounting Principles (GAAP) on practices, Code of Federal Regulations and OMB Circular Nos. A-21, A-87, A-110, A-122, and A-133. It is the responsibility of the Awardee to adhere to these regulations.

E. Progress Reports

1. The Awardee is required to submit semi-annual progress reports on time, complete, through the OTIS, and in conformance with CTCP instructions.
2. The final progress report is due on the last day of the grant term. The final report is to be a cumulative report that summarizes all activities and outcomes during the term of the grant and is to include all tracking measures including the Brief Evaluation and Final Evaluation reports.
3. If the Awardee fails to submit timely, complete progress reports documenting satisfactory progress, CDPH/CTCP will withhold payment of invoices and may terminate the grant.

F. Invoices

1. Documentation: The Awardee is required to maintain backup documentation for all expenditures and provide the backup documentation for an invoice if requested by CTCP. The Awardee shall maintain for review and audit purposes, adequate documentation of all expenses claimed. All invoice detail, fiscal records, or backup documentation shall be prepared in accordance with generally accepted accounting principles. CDPH/CTCP has the right to request documentation at any time to determine an agency's allowable expenses.
2. Submission of Invoices: The Awardee is required to submit invoices no less than once per quarter, no more than once a month. The Awardee must be able to fund up to 60 days of payroll, indirect expenses, and operating costs, as well as expenditures incurred by a subcontractor or consultant prior to reimbursement by the State. The Contractor incurs expenses for the previous work period and is then reimbursed by invoice(s) submitted to CDPH/CTCP a minimum of no less than once per quarter, no more than once per month, in arrears. The Prompt Payment Act requires State agencies to pay properly submitted, undisputed invoices within 45 calendar days of initial receipt.

G. Dispute Resolution, CDPH Rights, and Grant Termination

1. Resolution of Differences Between RFA and Contract Language:
   If an inconsistency or conflict arises between the terms and conditions appearing in the final grant and the proposed terms and conditions appearing in this RFA, any inconsistency or conflict will be resolved by giving precedence to the grant.

2. CDPH Rights:
   In addition to the rights discussed elsewhere in this RFA, CDPH/CTCP reserves the right to do any of the following:
   a) Modify any date or deadline appearing in this RFA.
   b) Issue clarification notices, addenda, alternate RFA instructions, forms, etc. If this RFA is clarified, corrected, or modified, CDPH/CTCP intends to post all clarification notices and/or RFA addenda on the CDPH/CTCP TCFOR website.
   c) CDPH/CTCP reserves the right to fund any or none of the applications submitted in response to this RFA. CDPH/CTCP may also waive any immaterial deviation in any application. CDPH/CTCP waiver of any immaterial deviation shall not excuse an application from full compliance with the grant terms if a grant is awarded.
   d) CDPH/CTCP reserves the right to withdraw any award or request modifications to the SOW and/or Budget of any application component(s) as a condition of the grant award.

3. Termination:
   CDPH/CTCP reserves the right to terminate the grant if the application submitted, awarded, modified, and approved by CDPH/CTCP as a result of this RFA is not implemented satisfactorily, or if work is not completed by the due dates prescribed in the grant's SOW.

Part IX. References

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12. California Department of Public Health CTCP. California Tobacco Facts and Figures 2016, Sacramento, CA: California Department of Public Health. 2016.
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17. The end of tobacco? The tobacco endgame. *Tobacco Control.* 2013;22 (Suppl 1).
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